Clinical Kinesiology

Vol IV: Muscles of the Upper Extremities, Shoulder, Forearm and Hand

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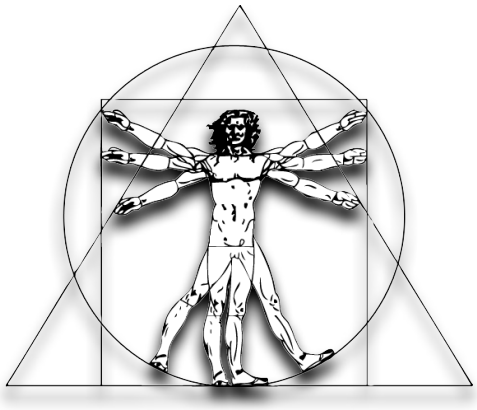

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DEDICATION

by the late Dr. Alan Beardall

To Kinesiologists world wide, who are seeking a holistic approach to health by observing and measuring the performance of the human body.

Acknowledgements

No book on Kinesiology would be complete without giving tribute to the founder, developer, and researcher of Applied Kinesiology, Dr. George Goodheart of Detroit, Michigan.

A special thanks to our present artist, Greg Smith, who has made second efforts on many occasions to give this book its special make up.

Special appreciation is given to my wife, Sharon, and my five boys, Christopher, Timothy, Michael, Thomas, and Mathew for their understanding and patience while I was separated from them during the preparation of this manual.

I would like to thank Dr. Rene Espy for manuscript editing, continued encouragement, and her kind support.

Cinde Gordon is responsible for the editing and actual manual preparation. Her special touch, dedication, and loyalty is seen in every page. Thank you Cinde.

Introduction

This is the fourth in a series of five workbooks to be published under the title Clinical Kinesiology. This manual contains all the muscles of the upper extremities from the shoulder to the fingers, 109 muscles inclusive.

Each muscle will be presented with the following data:

1.) A picture of the muscle itself with identification of the origin and insertion.
2.) A picture of the muscle test. This includes angles or degrees when indicated as well as points of bracing and contact for a proper muscle test. Numerous muscle tests are included herein that are not available in any other muscle testing manual.
3.) Verbalization of the actual location as well as visual pictures of the following reflexes: neurovascular, neurolymphatic, and two visceral reflexes.
4.) A description of the muscle action in addition to the normal description of the origin and insertion seen in earlier manuals.
5.) The point on the acupuncture meridians which affects the respective muscle the most is also listed. It is the muscle acupuncture point (M.A.P.)
6.) The vertebral level (V.L.) and Lovett Brother vertebral level (L. B. V. L.), which is the most common subluxation seen in the spinal column when the respective muscle is aberrant.
7.) The myomere (M.M.), which is the level in the spinal column where the most direct nerve route is located to the muscle.
8.) The cranial and related foot subluxations most commonly seen in clinical practice.
9.) The specific nutrient related to each muscle.

This text is divided into two separate units. First the muscles are listed and demonstrated by the most convenient and efficient testing procedure. This is a new innovation in this text. The second chapter lists the muscles as you might choose to study them. A new method of muscle study (that of looking at the muscle and identifying it by the insertion or action) is introduced. All the muscles that insert on the shoulder are studied together and are even subdivided into separate groups by identifying their respective origins. This represents a more practical way to study the muscles and will allow special insight into the complexities of muscles in certain areas like the forearm. For example, the muscles of the forearm are subdivided into the following:

1.) Muscles of the forearm whose insertion is on the Radius and Ulna.
2.) Muscles of the wrist whose origin is on the forearm.
3.) Muscles of the thumb and fingers whose origin is on the forearm.

The following books have been published by Clinical Kinesiology:

Volume I: Muscles of the low back and Abdomen
Volume II: Muscles of the Pelvis and Thigh
Volume III. Muscles of the TMJ, Hyoid, and Cervicals including Cranial Manipulation
Clinical Kinesiology Instruction Manual including Introduction to Hand Modes

The next two books to be published by Clinical Kinesiology will be:

1. A manual on the Endocrine and the Hand Mode systems.
2. Volume V: Muscles of the Lower Extremities, which will include all the muscles from the knee to the foot.

It should be clearly understood that this text is not intended to replace the excellent research manuals of Dr. George Goodheart nor those texts produced by Dr. David Walther. The author encourages you to avail yourself to these texts. The opinions, ideas, and concepts expressed in this manual do not necessarily reflect current medical opinion. They are the result of independent research obtained through clinical practice.

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Chapter I

Kinesiological Testing and Examination Procedure

Kinesiology Testing And Examination Procedure

This chapter of the book deals with muscle testing. Muscle testing has become an important part of a Chiropractic examination. The information given is invaluable in evaluating the musculoskeletal part of the patient's symptoms. Muscle tests should be performed with the understanding of the factors involved in good muscle testing. See the Clinical Kinesiology Instruction manual, pages 46- 47.

The muscles of the upper extremities number one hundred and nine.
In this chapter, they are divided into the following categories:

1.) Muscles of the Shoulder (tested with arm straight)
2.) Muscles of the Shoulder (tested with arm flexed)
3.) Muscles of the Elbow and Forearm
4.) Muscles of the Wrist
5.) Muscles of the Hand
    A. Muscles of the Thumb
    B. Muscles of the Fingers
    C. Muscles of the Hand

The muscles are pictured and numbered in a sequence that might suggest the most efficient manner in which to test all one hundred nine muscles in a complete kinetic examination of the upper extremities. They are listed from shoulder to elbow to wrist and to the Hand. It was found that one of the most important features of an efficient kinesiological examination is maintaining the same hand contact as much as possible regardless of the position of the arm.

In the first ten muscles of the upper extremities, the doctors hand contact (on the lateral aspect of the forearm) and the brace remain the same except for the three divisions of the Latissimus Dorsi. Then, only the position of the arm changes. We have tried to retain this same flow throughout the muscle testing procedure. Muscle tests of the shoulder, numbered 11 - 13, involve the straight arm test. Any intact muscle test may also be used along with specific areas of therapy localization which are located in their respective muscle bellies. In muscle tests numbered 14 - 19, note that the contact is on the dorsum of the forearm and in tests numbered 20 - 23, the contact is made on the palmar aspect of the forearm.

The next section contains the muscles of the shoulder tested with the elbow flexed. Note that all of the muscles tested in the previous section were with arm straight and are indirect tests of the muscles of the shoulder with the exception of the Latissimus Dorsi. That is, all the muscles don't directly insert on the extremity (humerus) that you are using as a fulcrum. It is believed that with the arm straight, the nervous system automatically computes the leverage and uses as the primary mover those muscles that attach to the

Scapula and Clavicle. When the elbow is flexed, the primary movers become muscles that insert on the humerus. This can be readily demonstrated in kinesiolgical testing. With the exception of the first four muscles listed in this section, all other muscles insert into the Humerus and are direct muscle tests.

The next section of the muscle tests includes the muscles of the elbow and forearm. These are muscles that insert into either the Radius or Ulna. They include muscles of the posterior and anterior aspect of the humerus as well as the pronators and supinators of the forearm.

There are ten muscles of the wrist in the next section. They are divided into the muscles of wrist flexion (1 - 5) and muscles of wrist extension (6 - 10).

The muscles of the hand are divided into three sections:

1.) Muscles of the thumb
   - A. Muscle insertion into the distal phalanx
   - B. Muscle insertion into the proximal phalanx
   - C. Muscle insertion into the first metacarpal

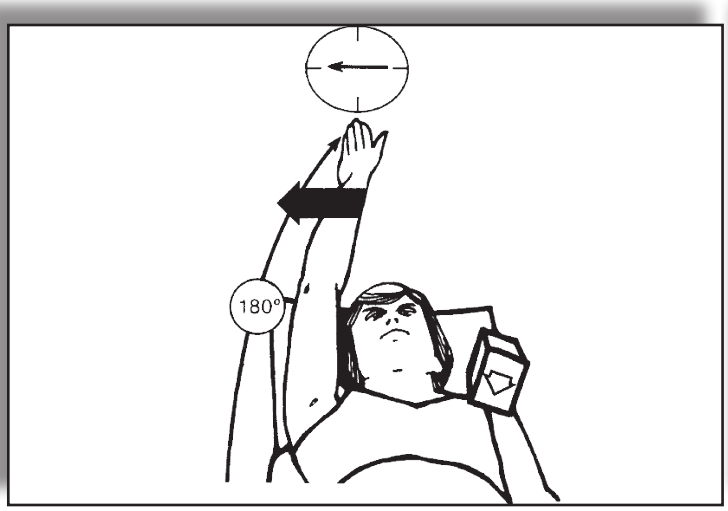
2.) Muscles of the fingers
   - A. Muscles of extension (tested in order from index to little finger)
   - B. Muscles of flexion (tested from all muscles of the little finger through all of the muscles of the index finger)

3.) Muscles of the hand
   - A. A muscle that has it's origin and insertion in the hand but doesn't insert on the fingers or thumb.

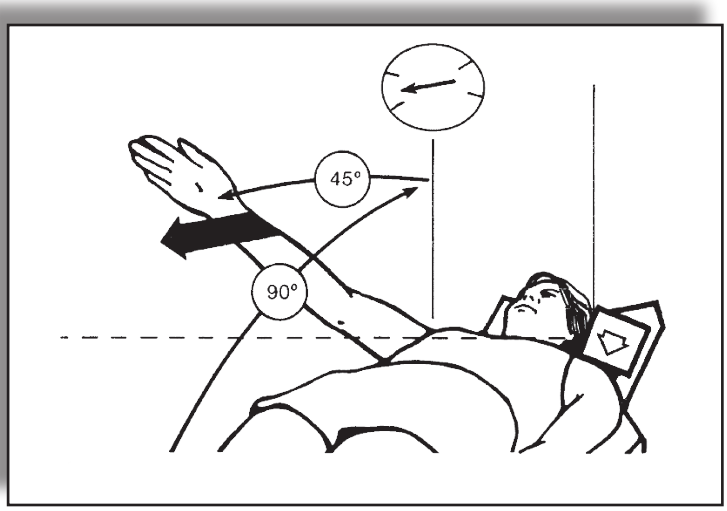
I trust this pictorial demonstration will allow you to quickly and efficiently learn and test the respective muscles of each division and the upper extremity as a whole.

Section I

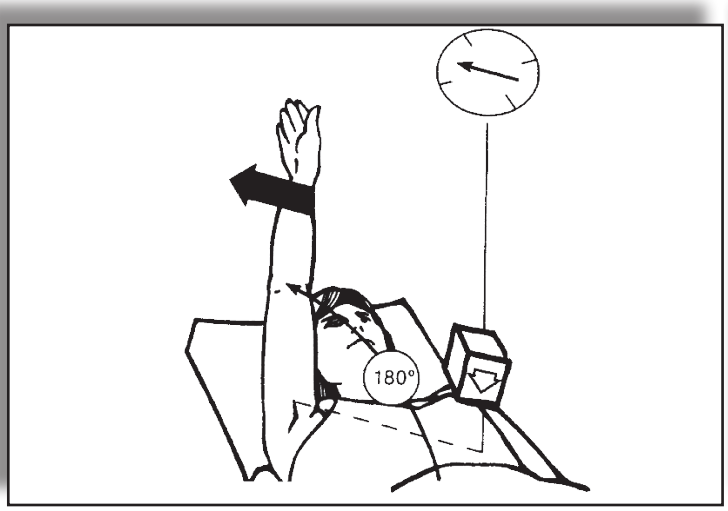
Muscles of the Shoulder (Arm Straight)



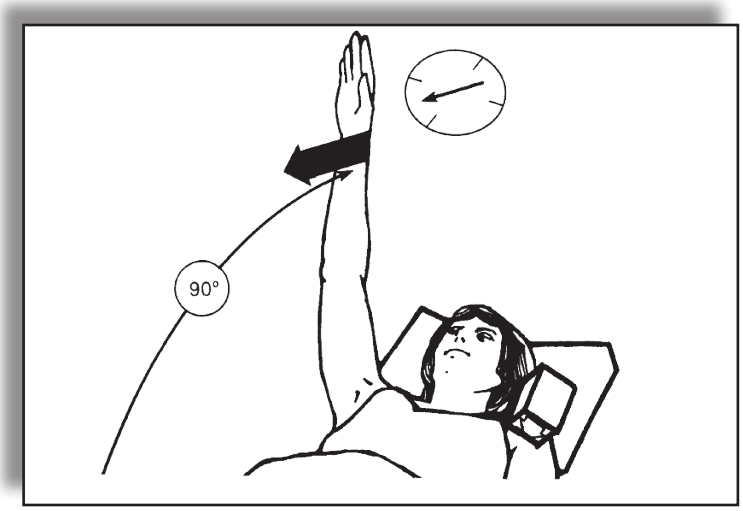
410 Subclavius, Clavicular Division



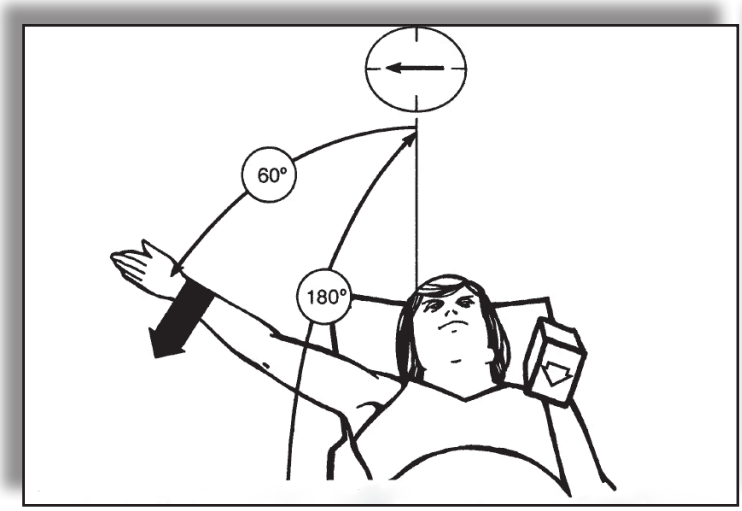
402 Serratus Anterior, Superior Division



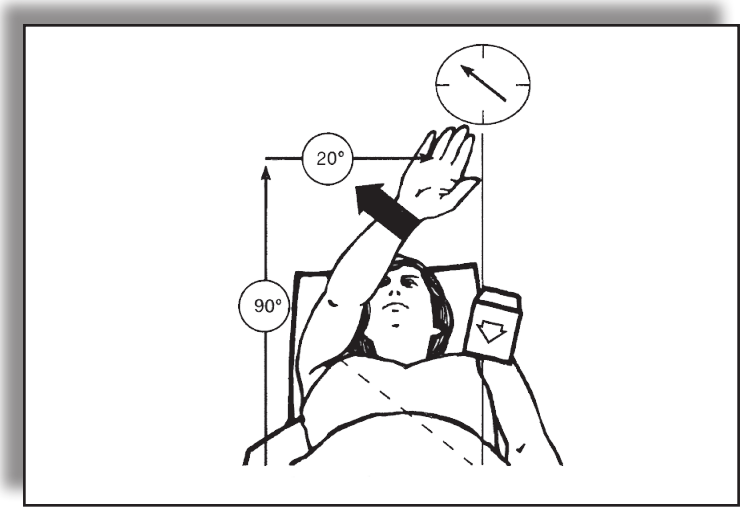
412 Subclavius, Scapular Division



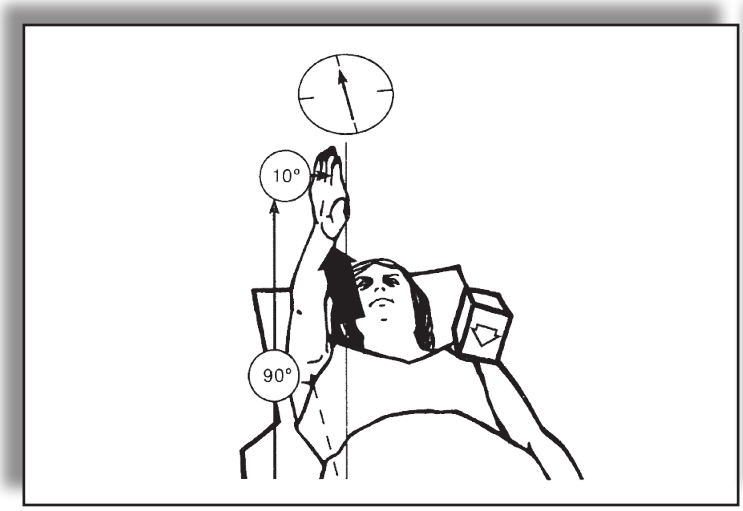
460 Pectoralis Major, Clavicular Division



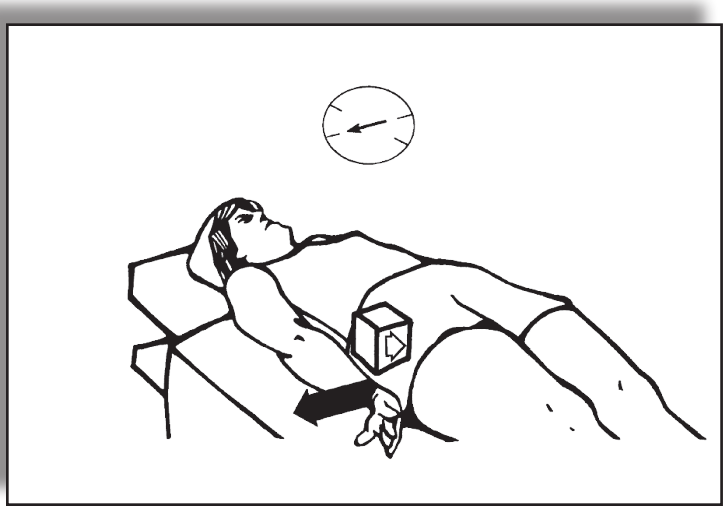
272 Upper Trapezius, Clavicular Division



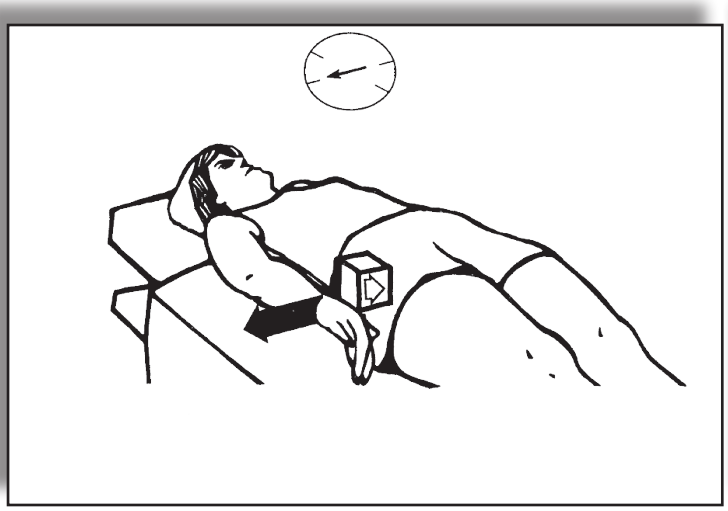
462 Pectoralis Major, Sternal Division



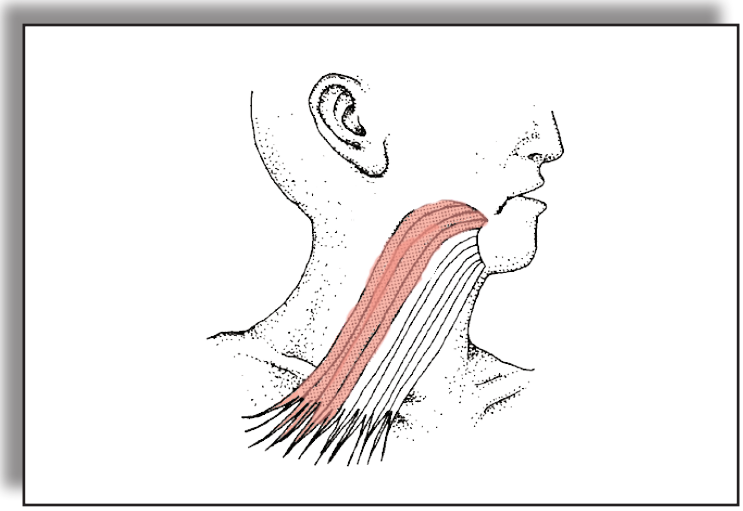
464 Pectoralis Major, Costal Division



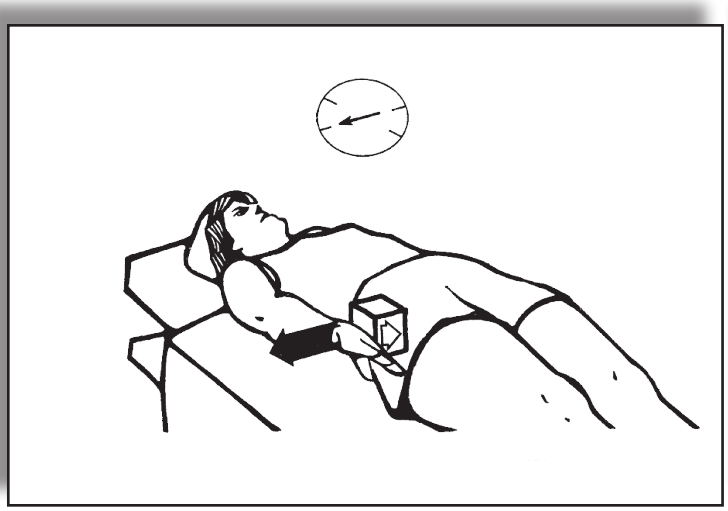
418 Latissimus Dorsi, Iliac Division



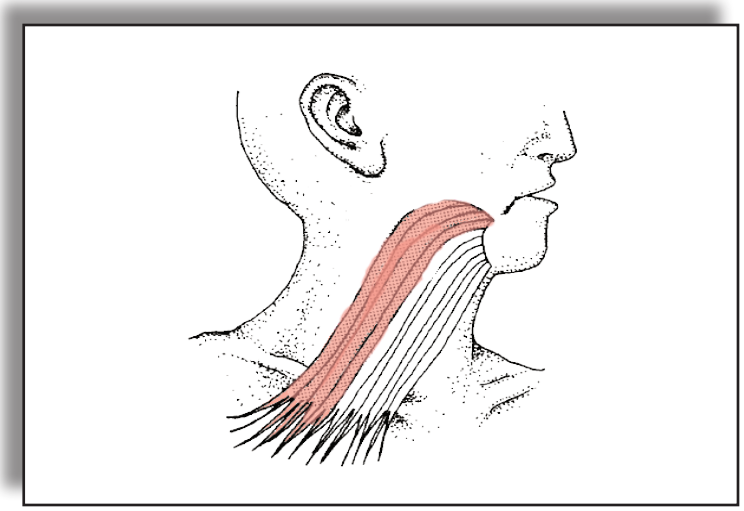
414 Latissimus Dorsi, Thoracic Division



286 Platysma, Anterior Division



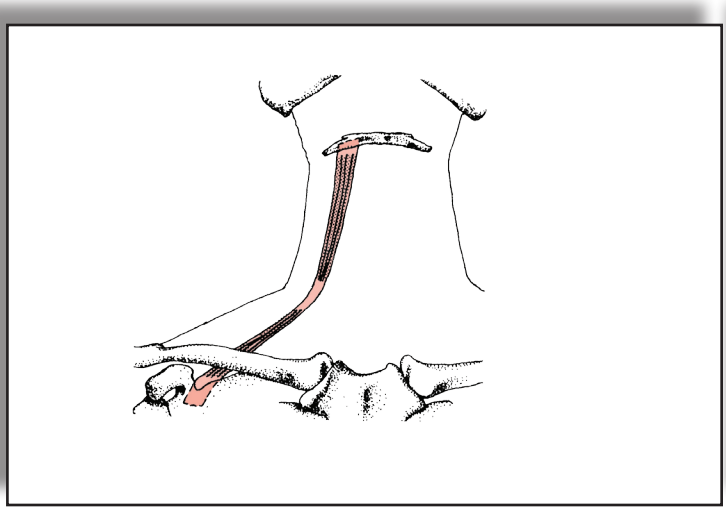
416 Latissimus Dorsi, Lumbar Division



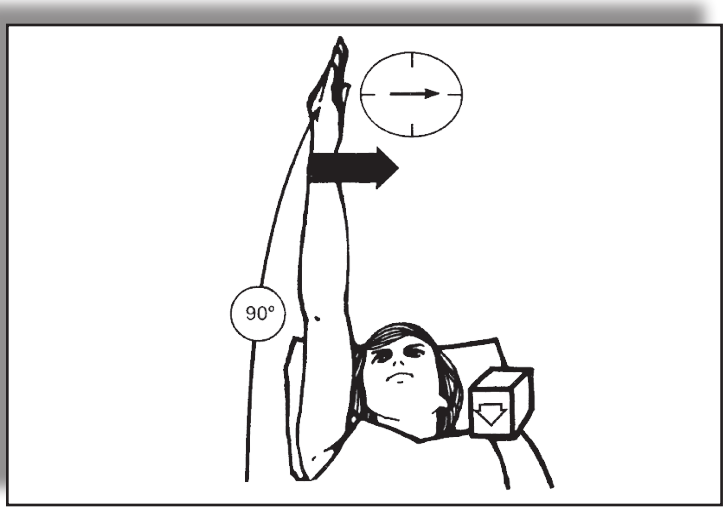
288 Platysma, Posterior Division

Section I

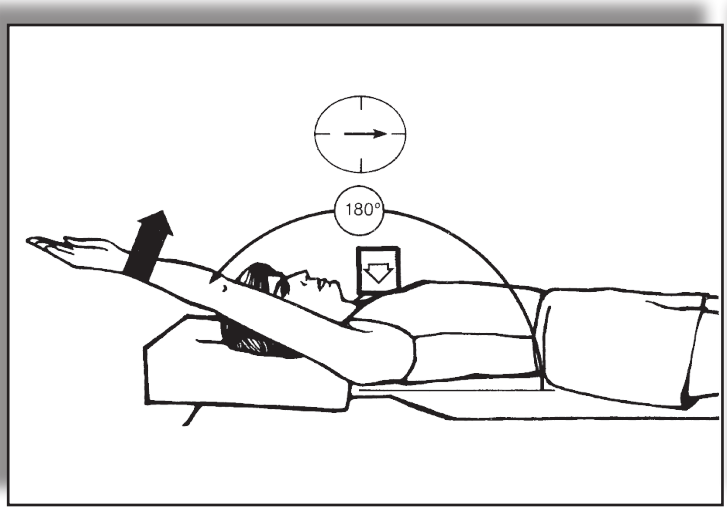
Muscles of the Shoulder (Arm Straight)



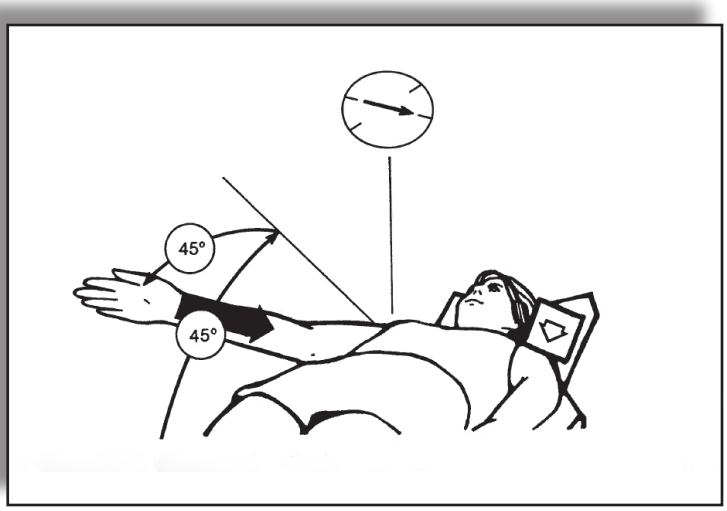
306 Omohyoideus



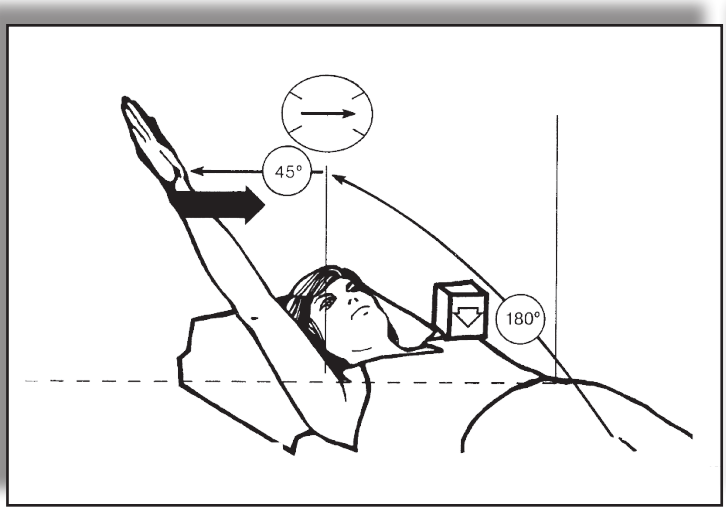
390 Trapezius, Middle Division



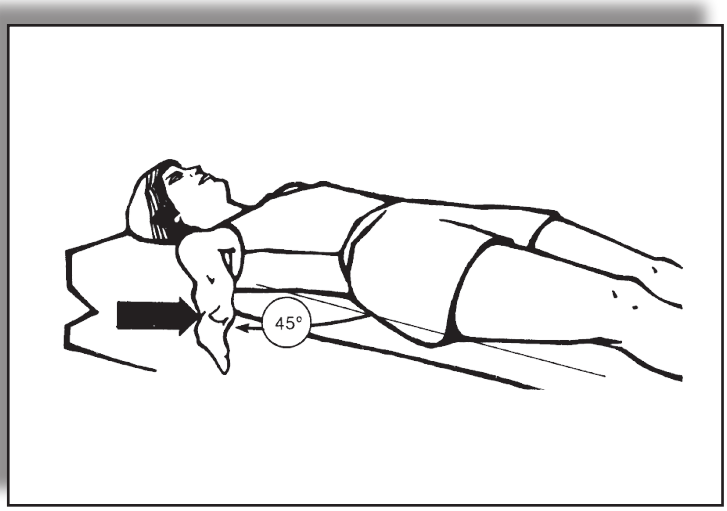
404 Serratus Anterior, Inferior Division



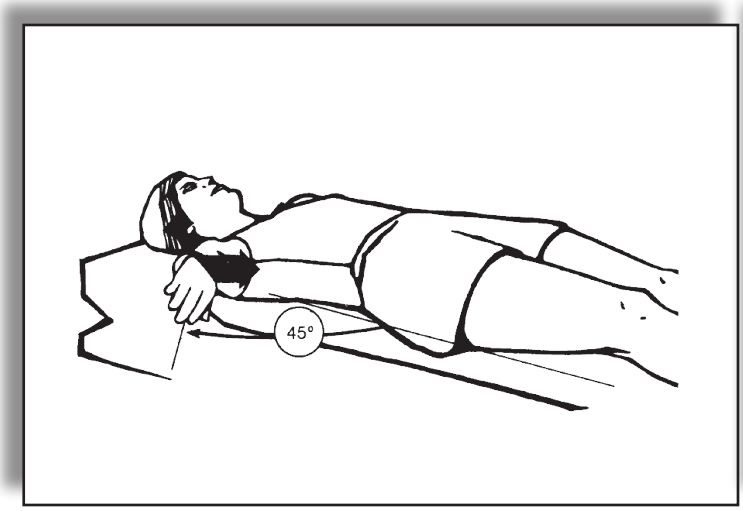
270 Upper Trapezius, Scapular Division



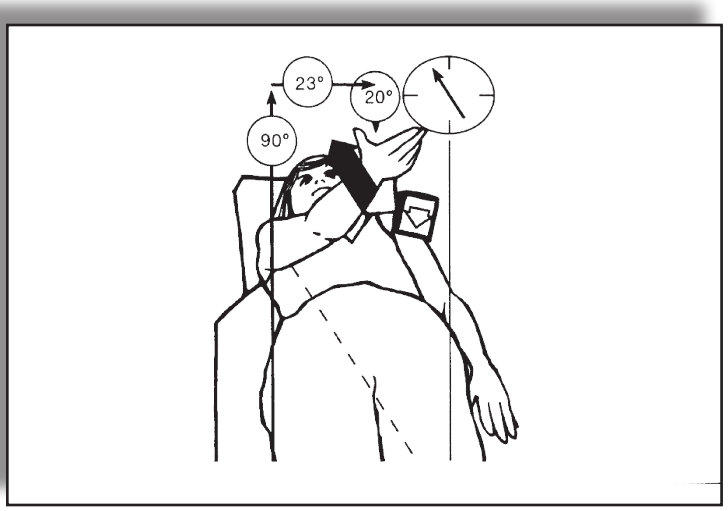
392 Trapezius, Lower Division



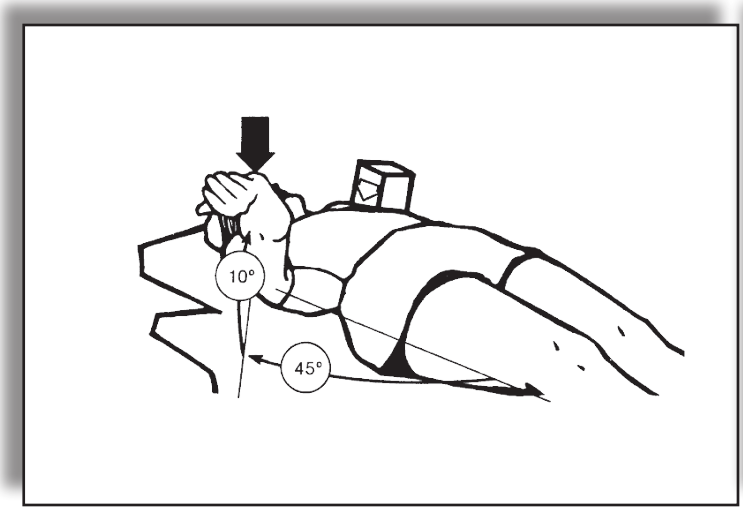
422 Supraspinatus, Fossa Division



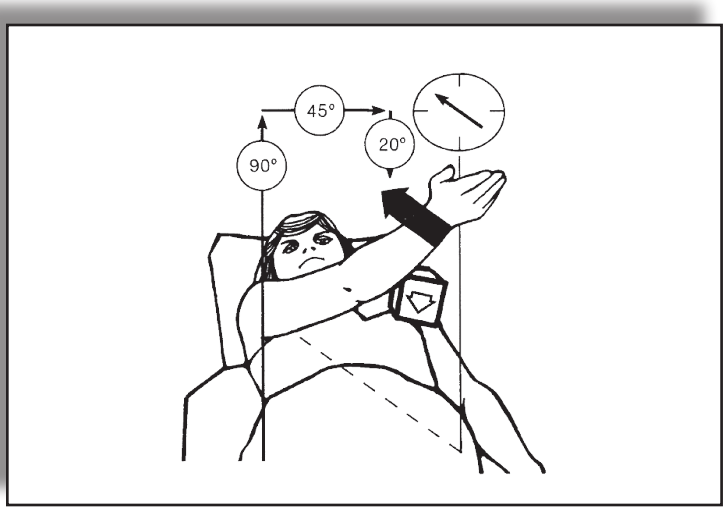
420 Supraspinatus, Spine Division



408 Pectoralis Minor, Inferior Division



444 Coracobrachialis, Coracoid Division



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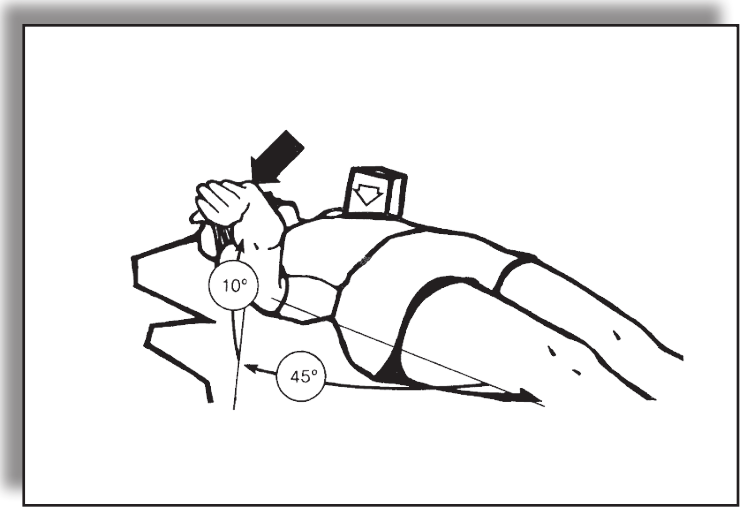
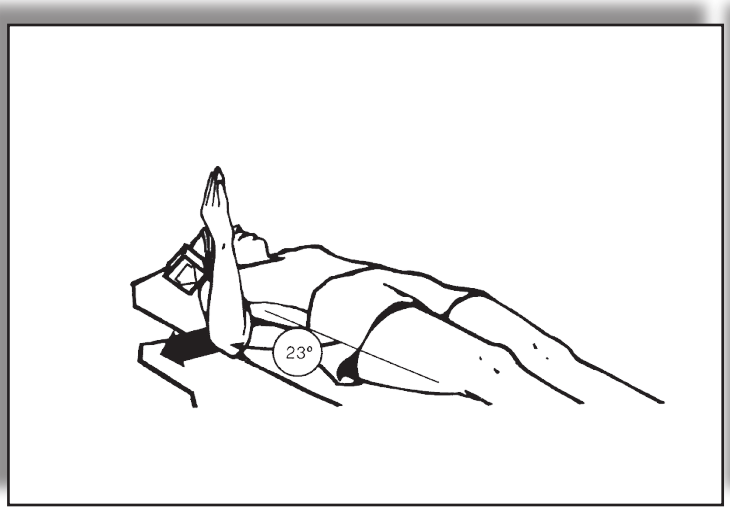


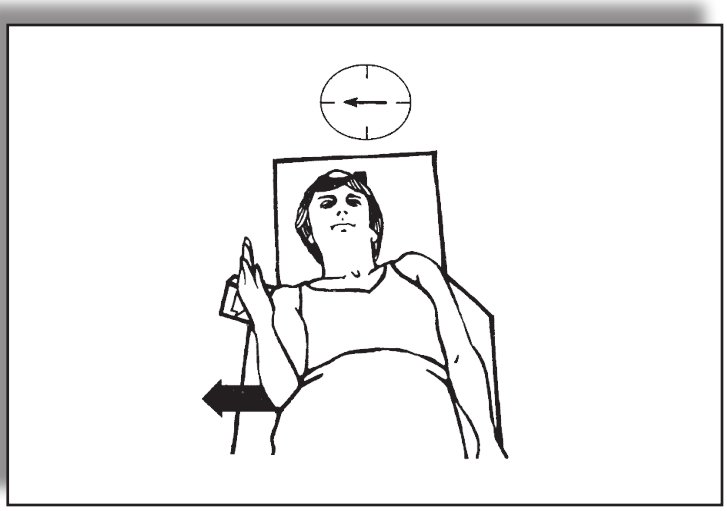
446 Coracobrachialis, Septal Division

Section II

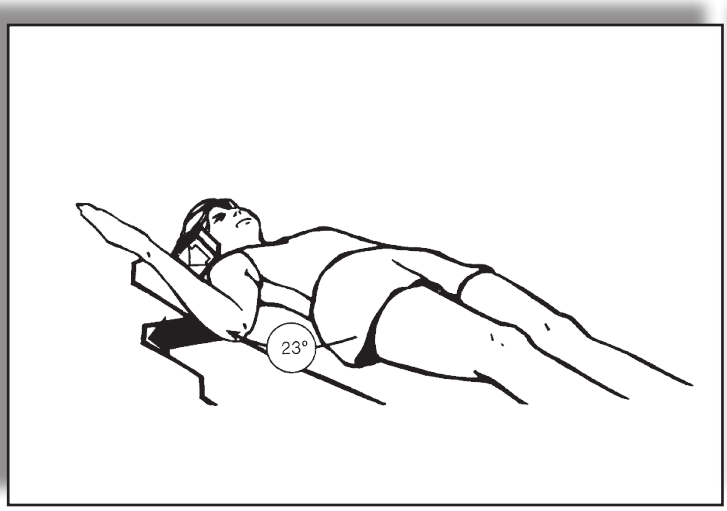
Muscles of the Shoulder (Arm Flexed)



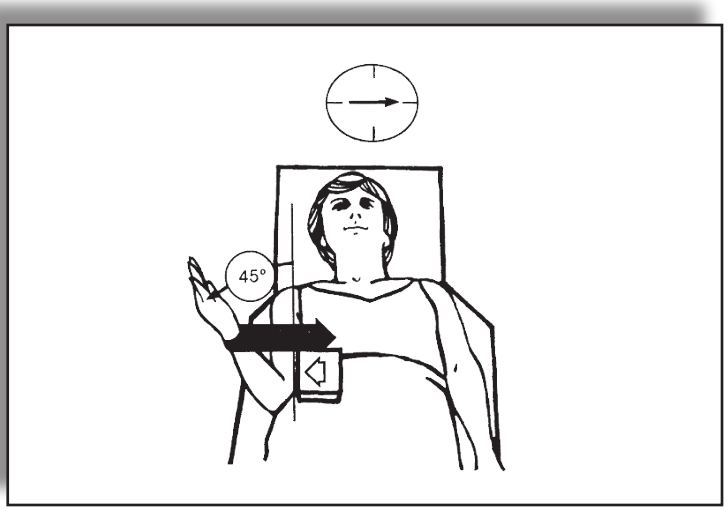
400 Rhomboid Major



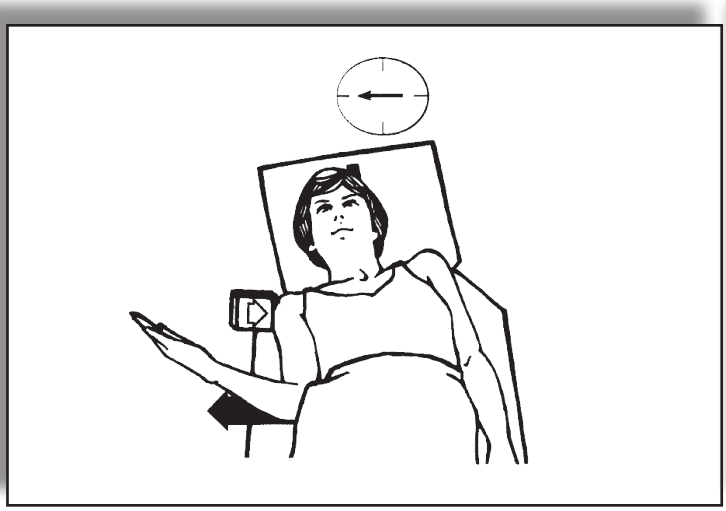
396 Levator Scapula, Inferior Division



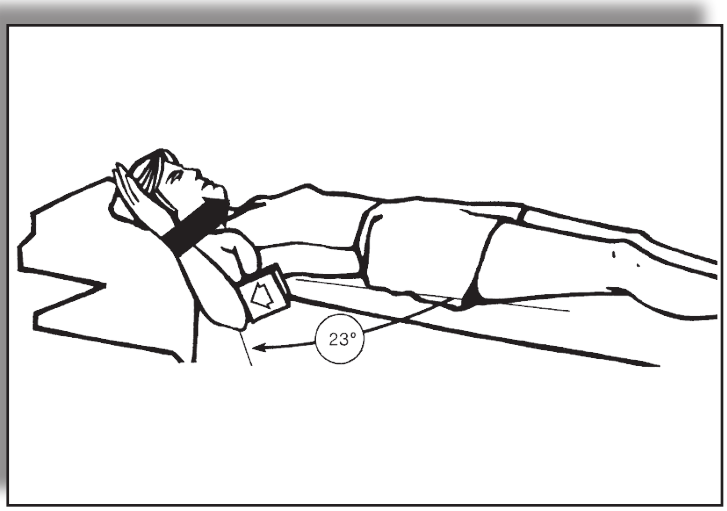
398 Rhomboid Minor



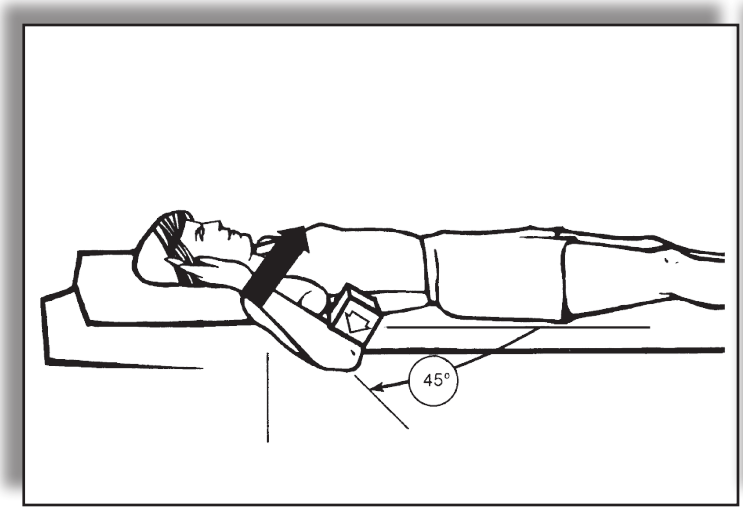
430 Teres Minor



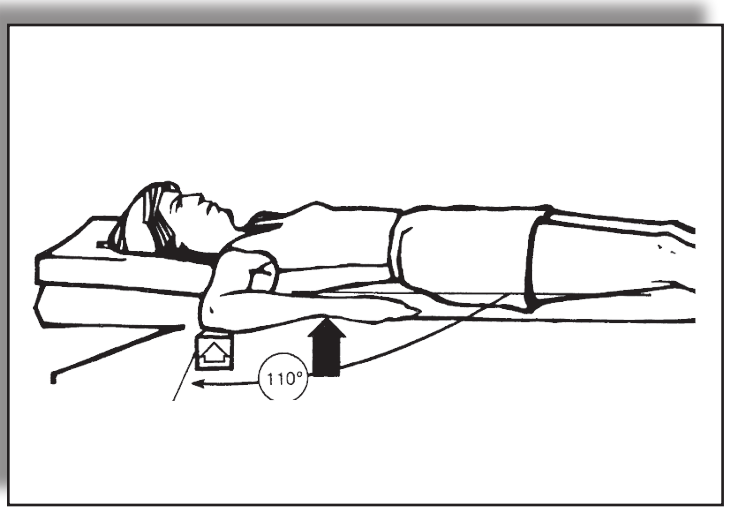
394 Levator Scapula, Superior Division



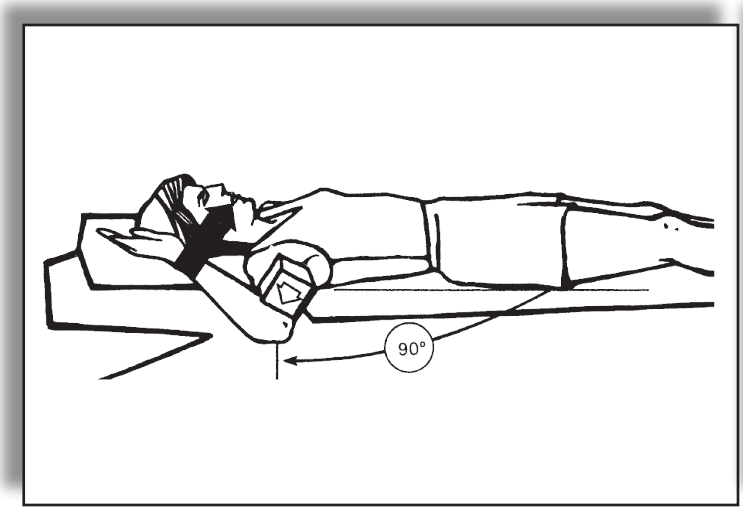
428 Infraspinatus, Inferior Division



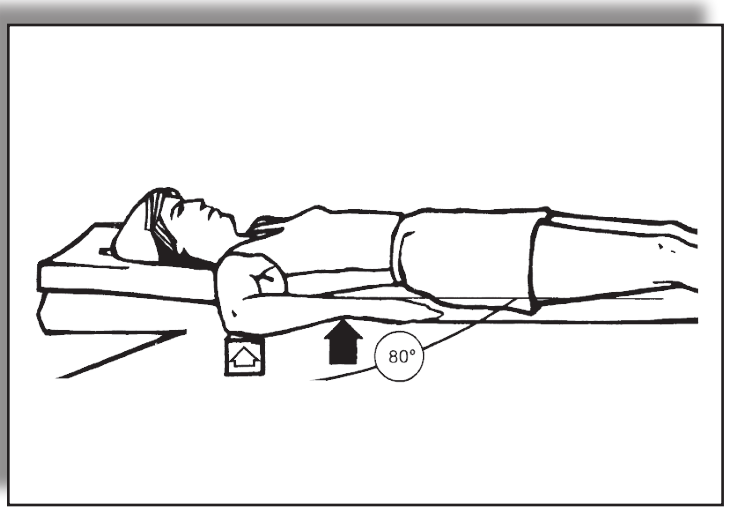
426 Infraspinatus, Middle Division



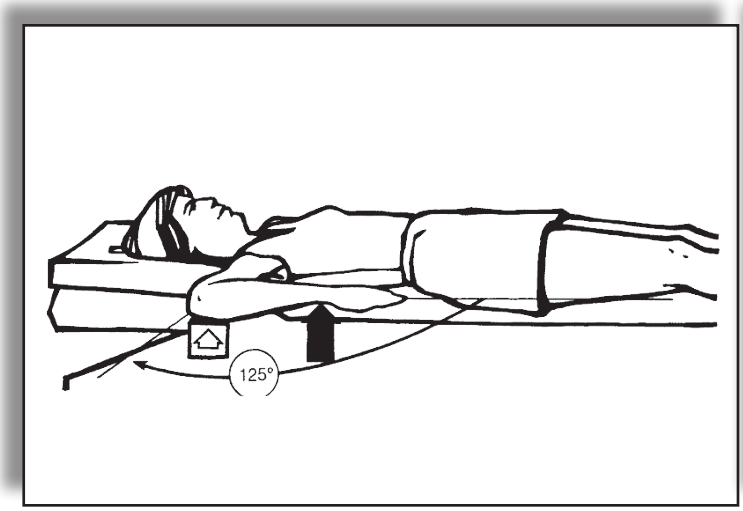
438 Subscapularis, Third Division



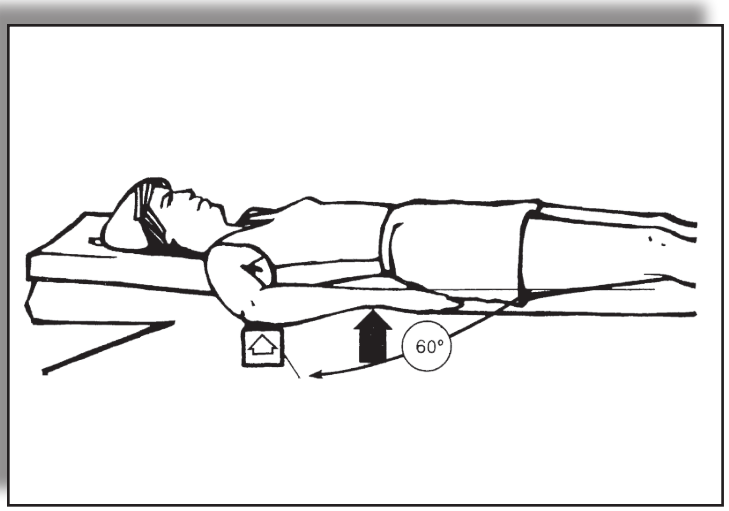
424 Infraspinatus, Superior Division



440 Subscapularis, Second Division



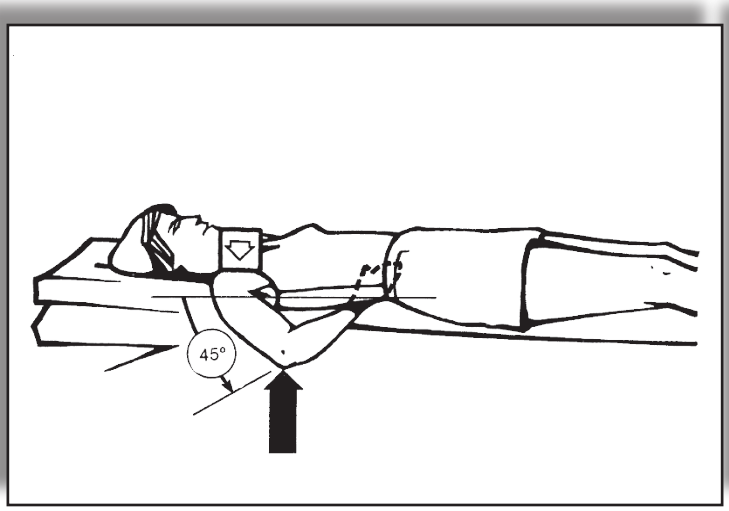
436 Subscapularis, Superior Division



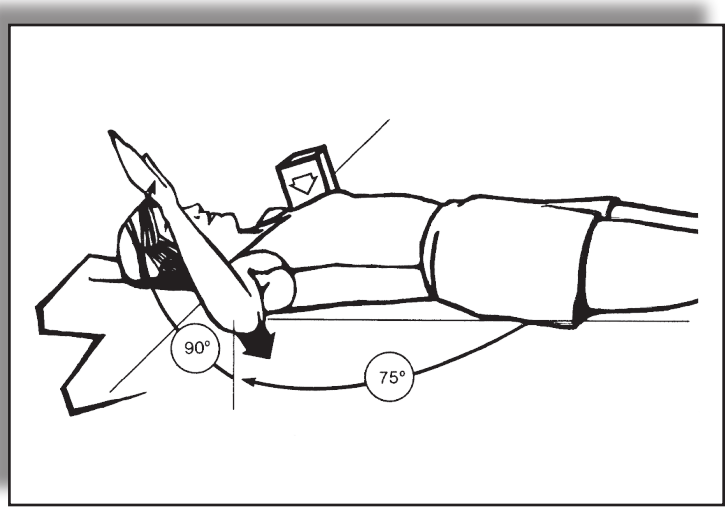
442 Subscapularis, Inferior Division

Section II

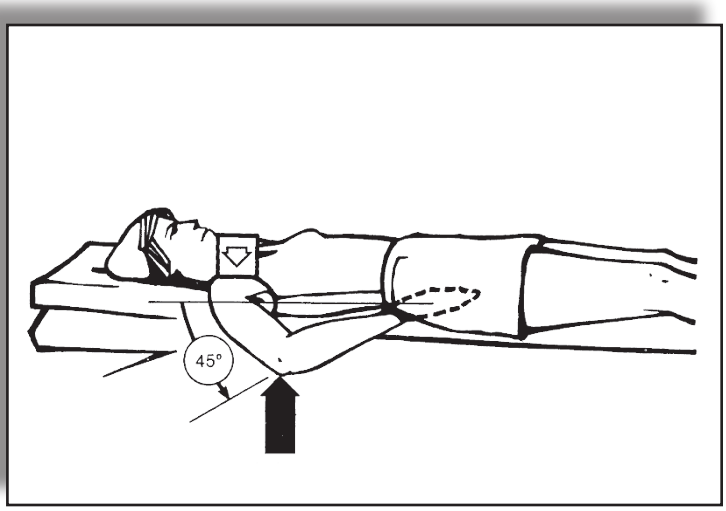
Muscles of the Shoulder (Arm Flexed)



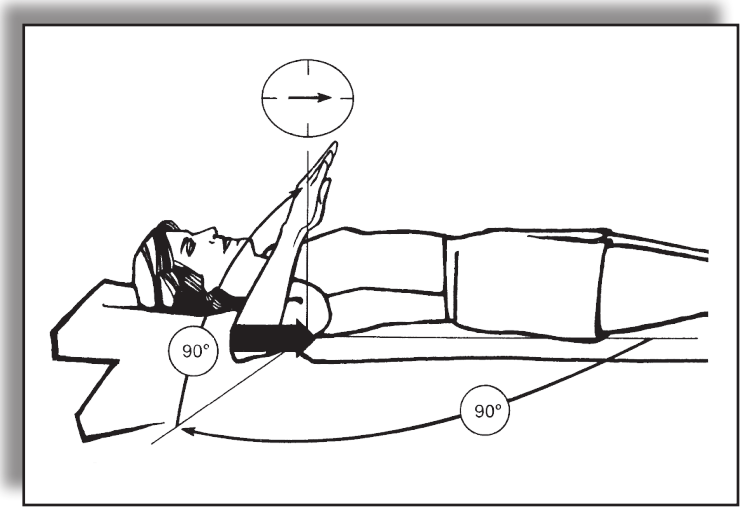
432 Teres Major, Superior Division



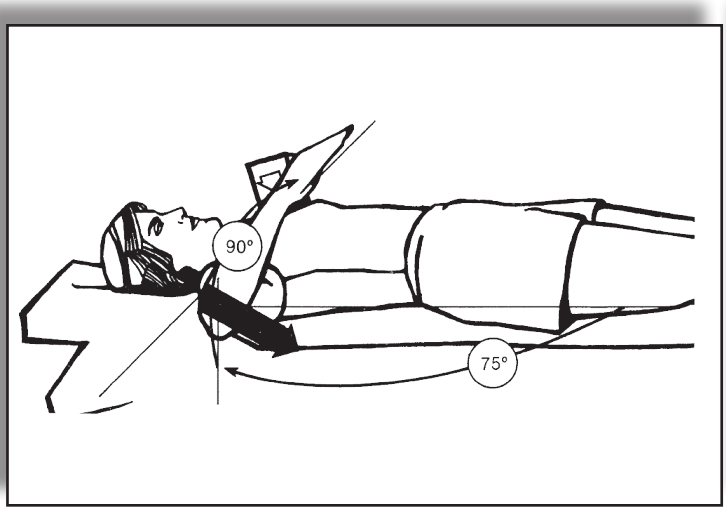
458 Deltoideus, Anterior, Clavicular Division



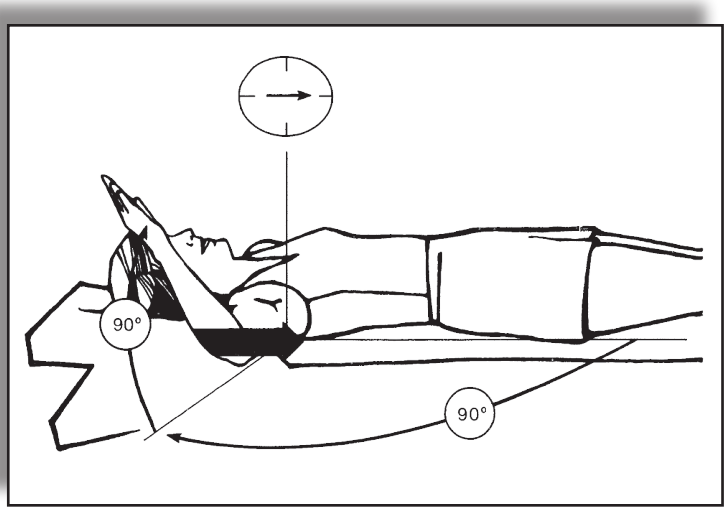
434 Teres Major, Inferior Division



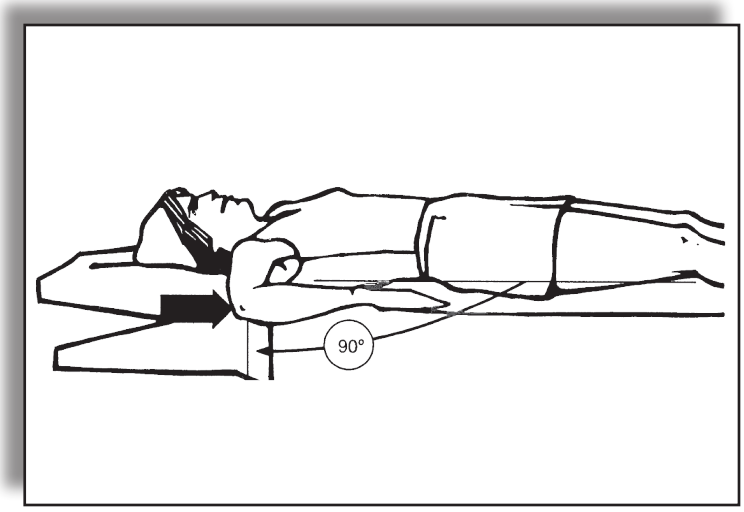
452 Deltoideus, Middle, Posterior Division



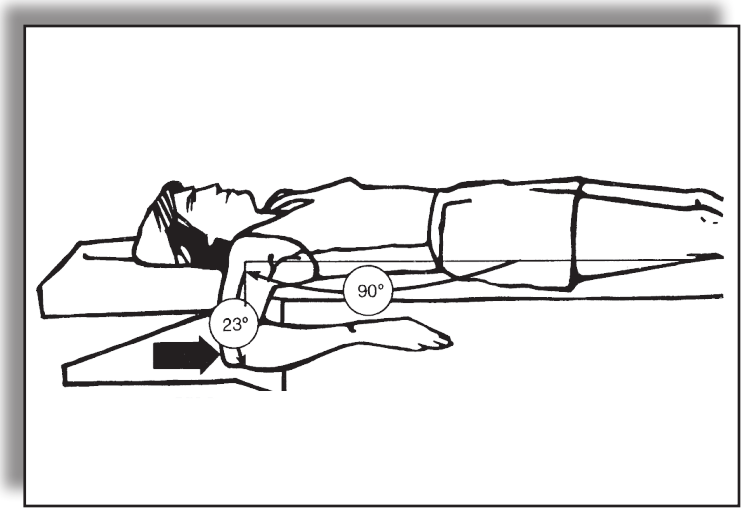
456 Deltoideus, Anterior, Scapular Division



454 Deltoideus, Middle, Anterior Division



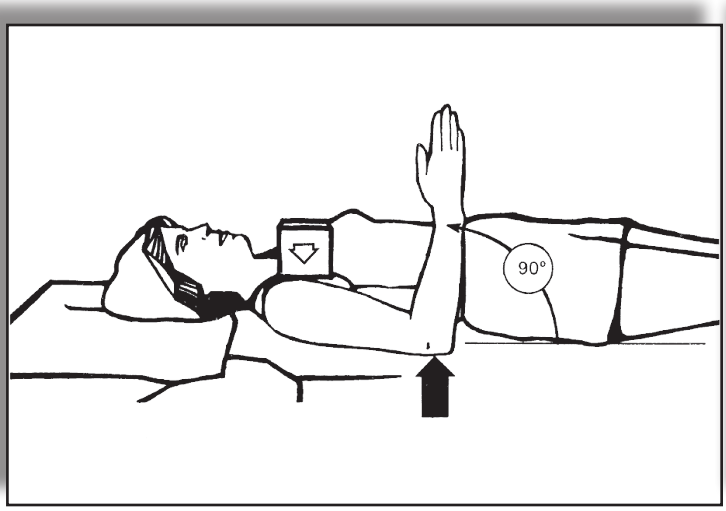
450 Deltoideus, Posterior, Lateral Division



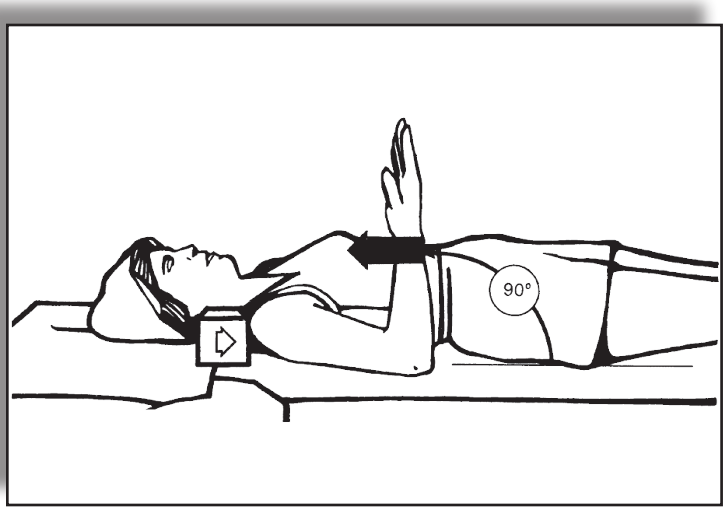
448 Deltoideus, Posterior, Medial Division

Section III

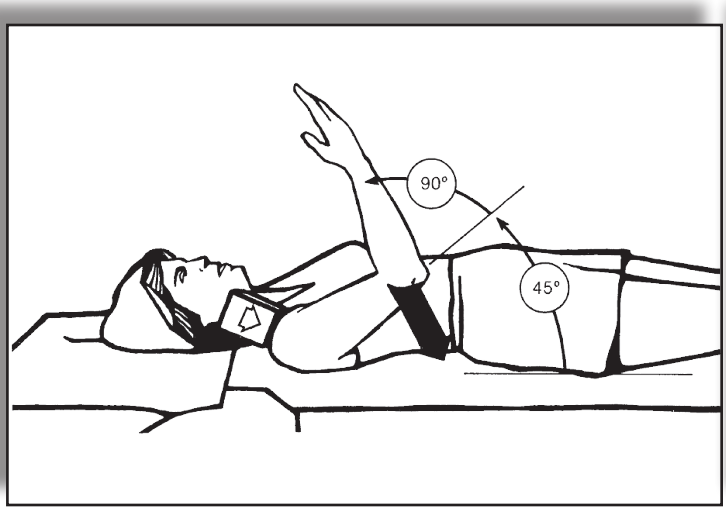
Muscles of the Elbow and Forearm



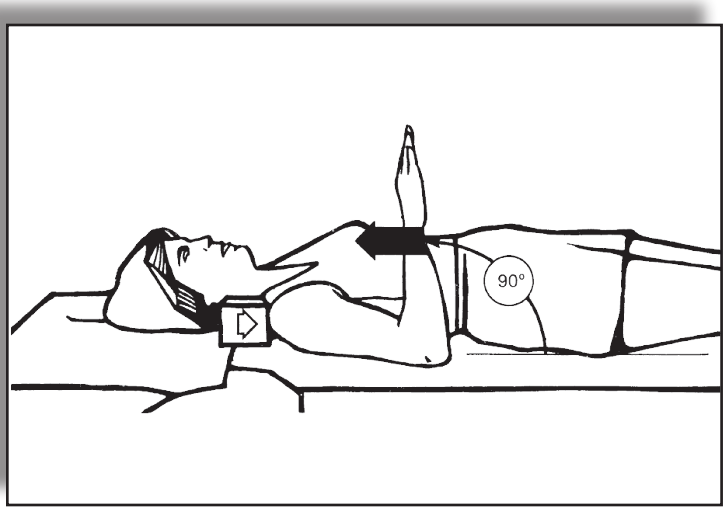
470 Triceps, Long Head



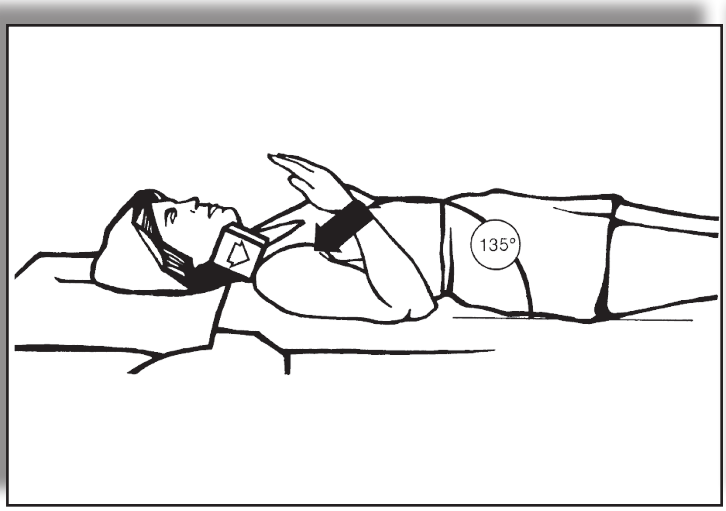
472 Triceps, Lateral Head



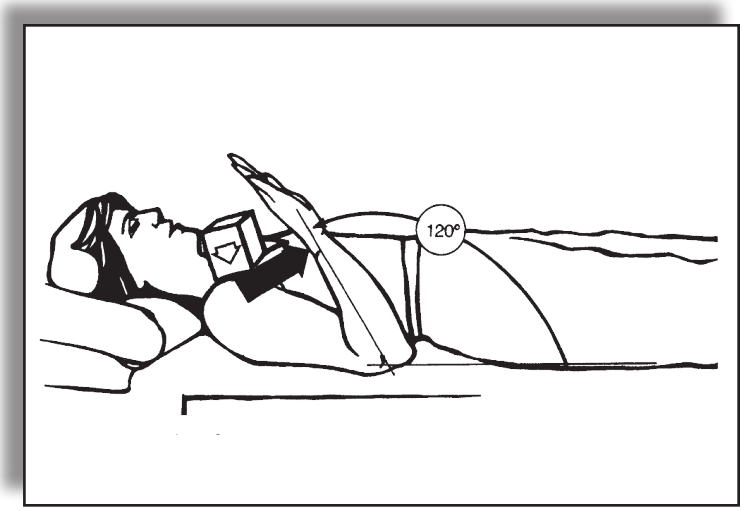
466 Biceps Brachii, Long Head



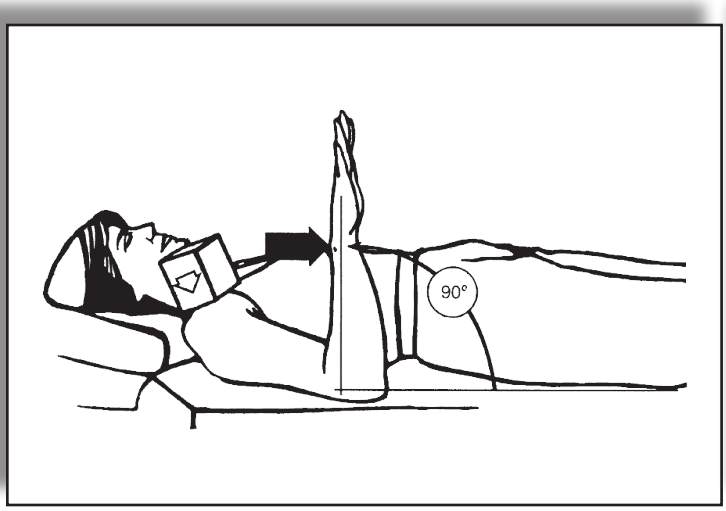
474 Triceps, Medial Head



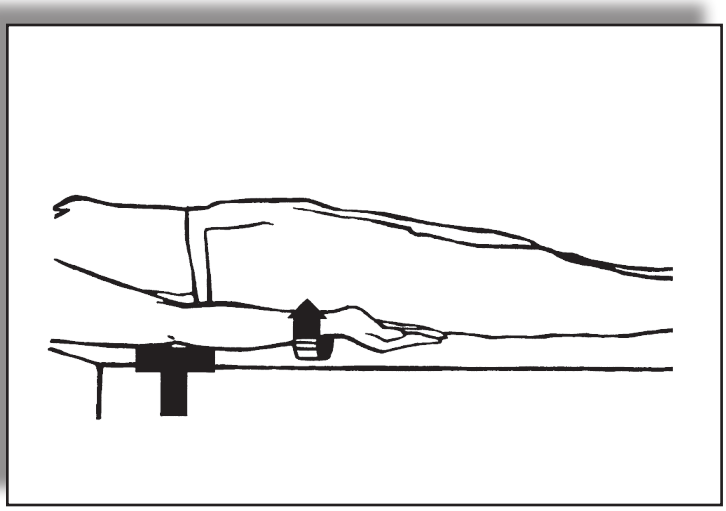
476 Articularis Cubiti



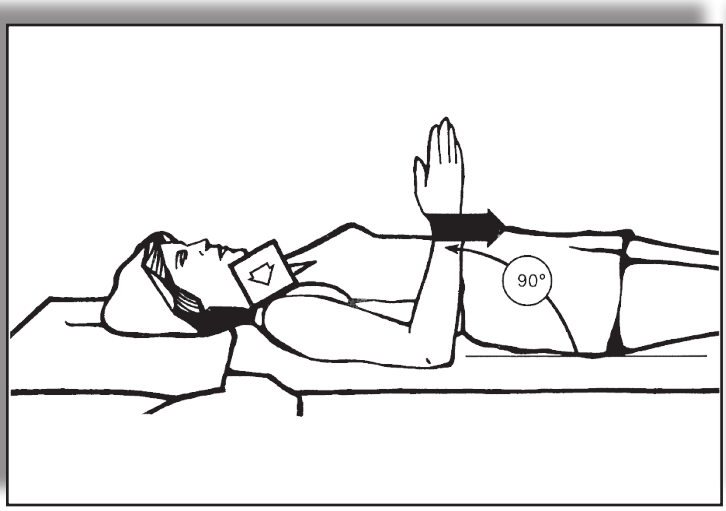
482 Brachioradialis, Septal Division



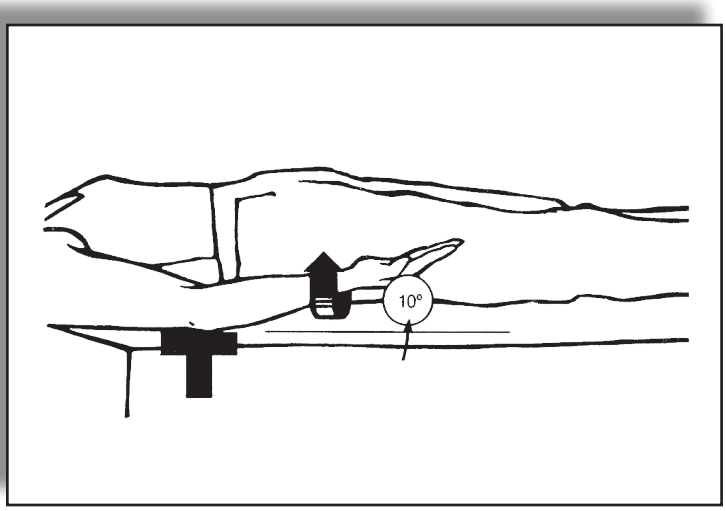
480 Brachioradialis, Humeral Division



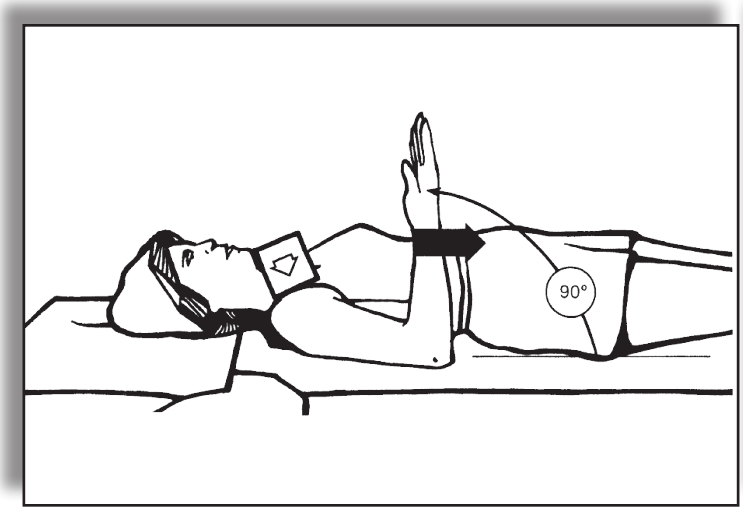
490 Anconeus, Ulnar Division



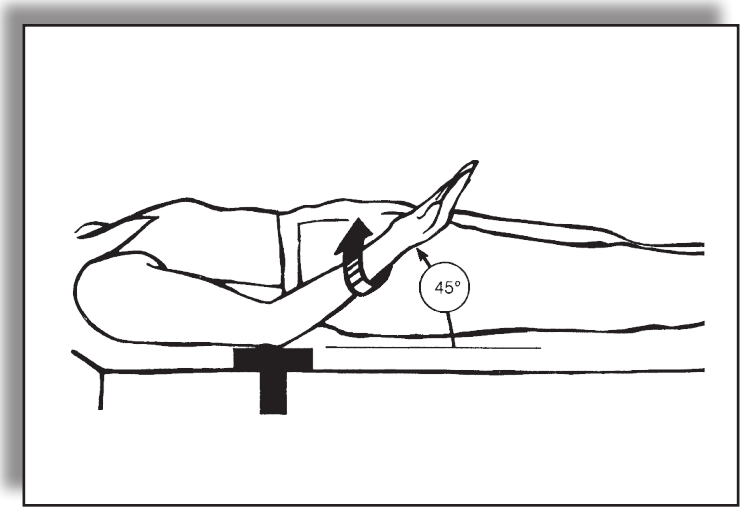
478 Brachialis



488 Anconeus, Olecranon Division



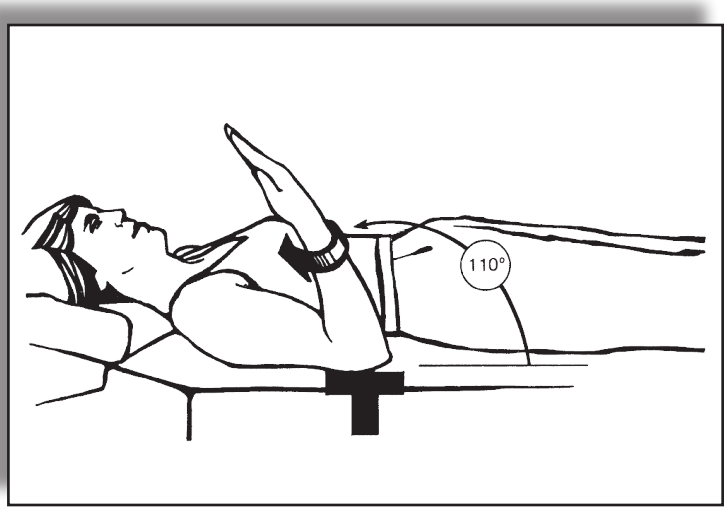
468 Biceps Brachii Short Head



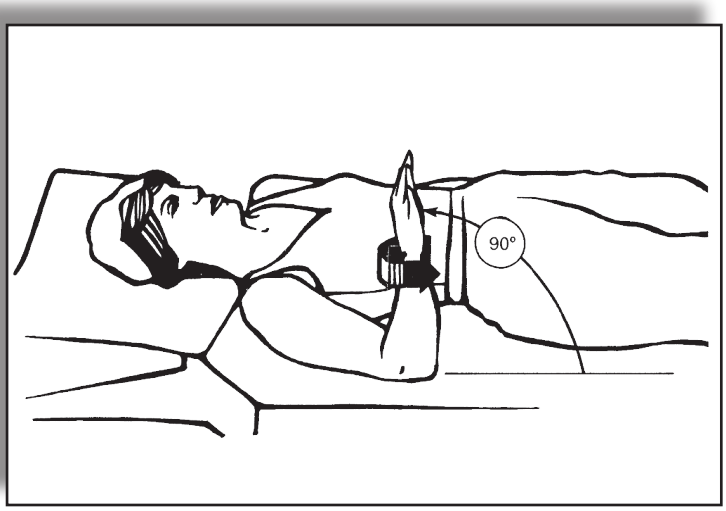
492 Supinator, Radial Division

Section III

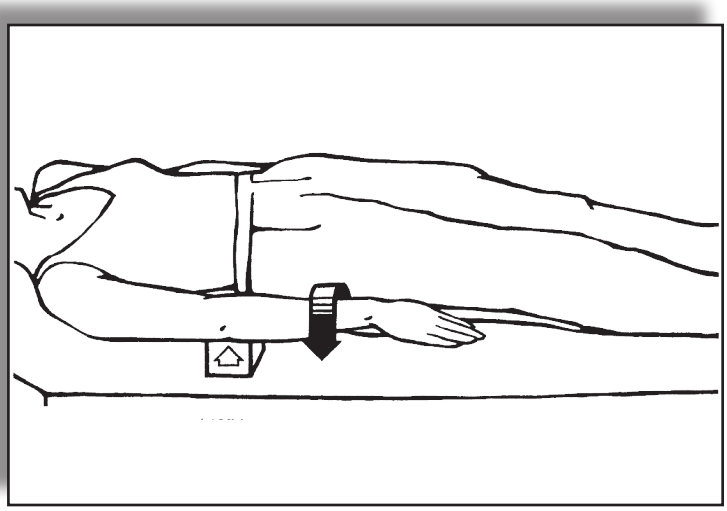
Muscles of the Elbow and Forearm



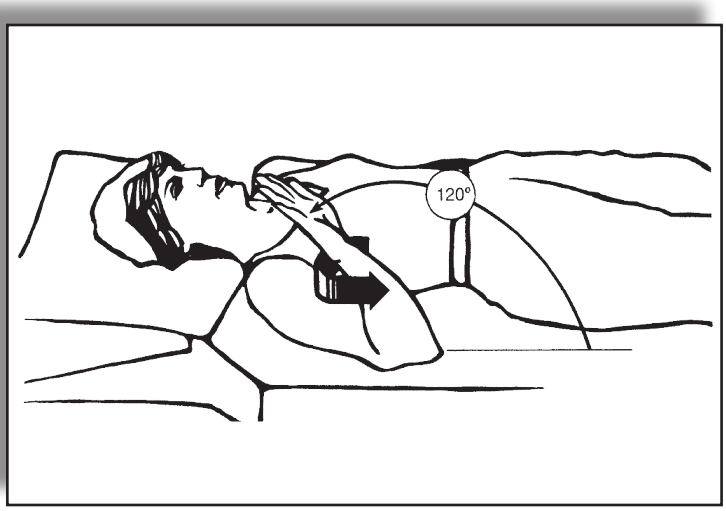
494 Supinator, Ulnar Division



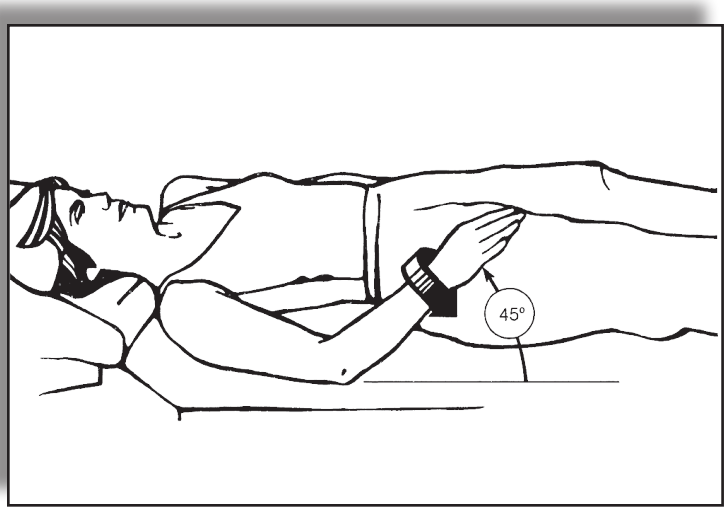
496 Pronator Quadratus, Proximal Division



484 Pronator Teres, Humeral Division



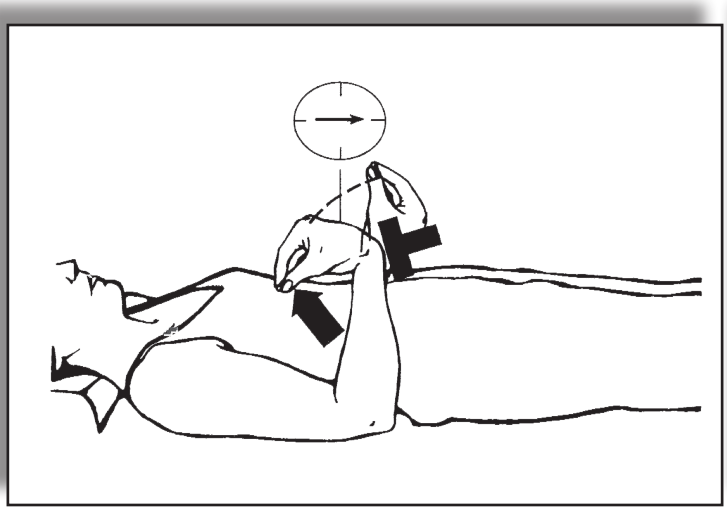
498 Pronator Quadratus, Distal Division



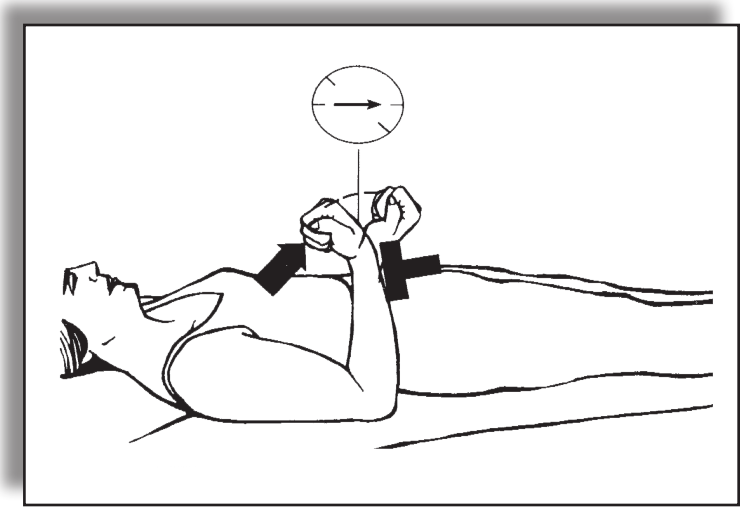
486 Pronator Teres, Ulnar Division

Section III

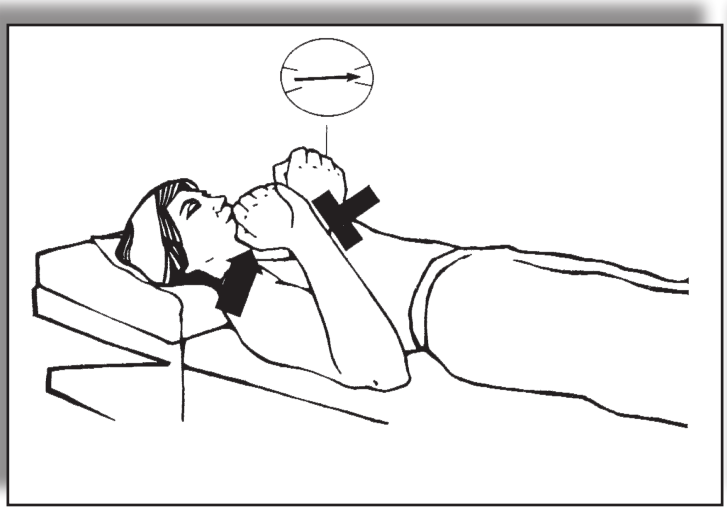
Muscles of the Wrist



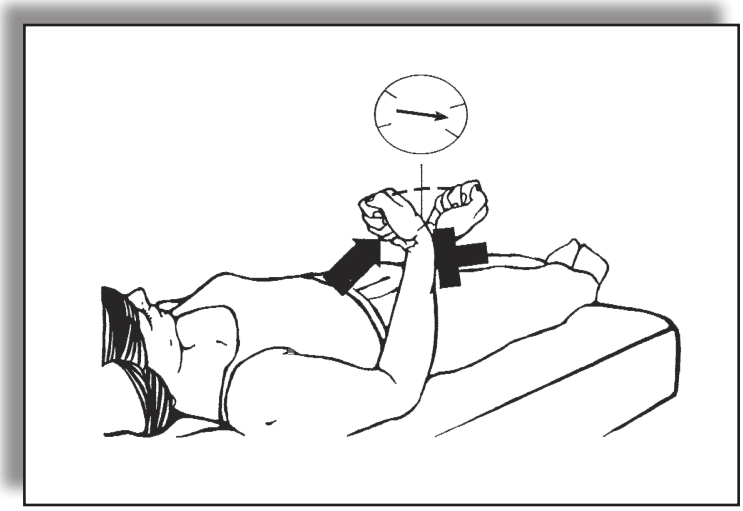
500 Palmaris Longus



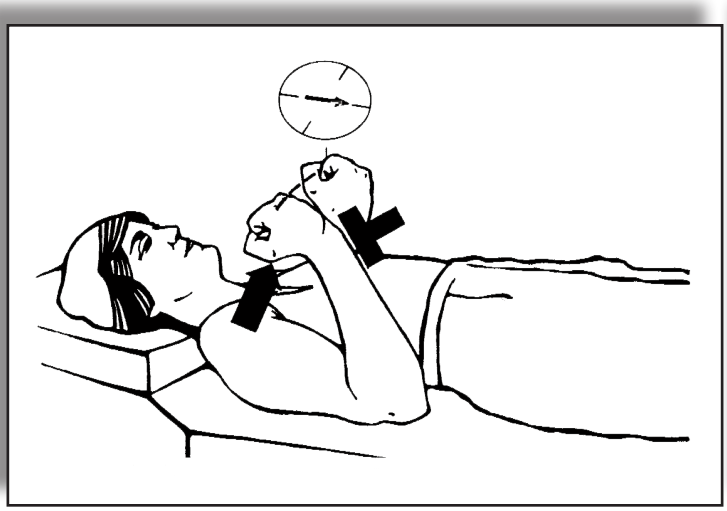
506 Flexor Carpi Ulnaris, Flexor Division



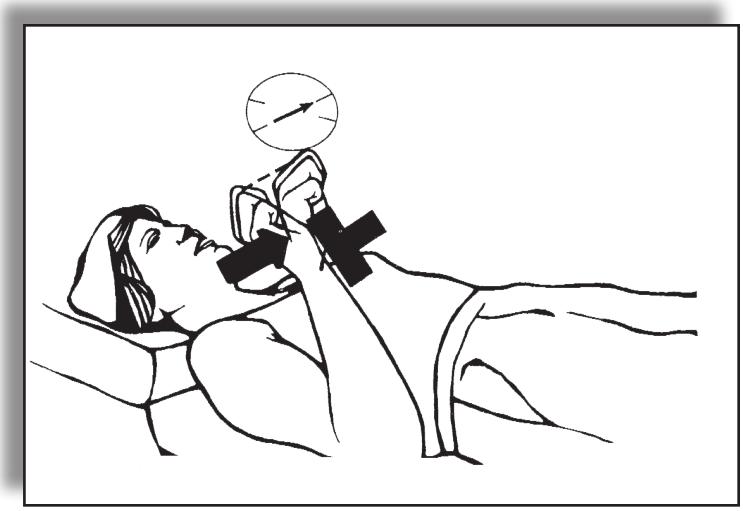
502 Flexor Carpi Radialis, Abductor Division



508 Flexor Carpi Ulnaris, Adductor Division



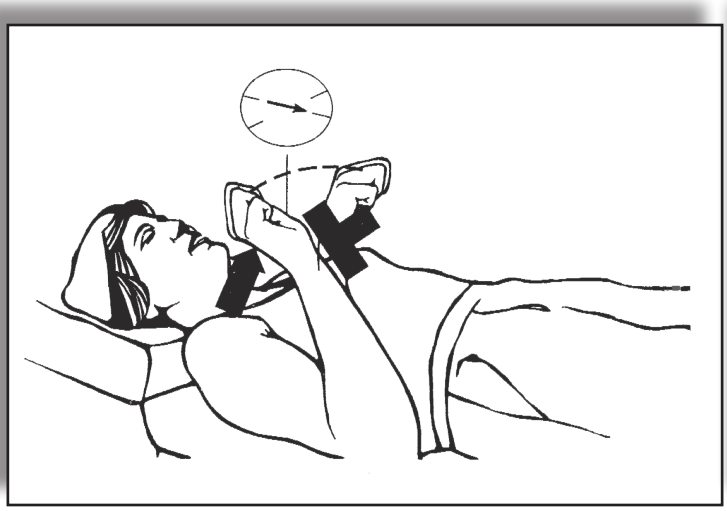
504 Flexor Carpi Radialis, Flexor Division



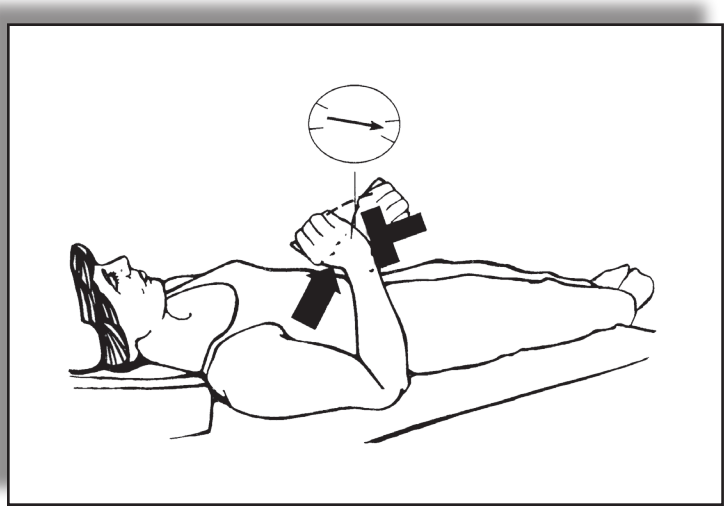
510 Extensor Carpi Ulnaris, Adductor Division

Section IV

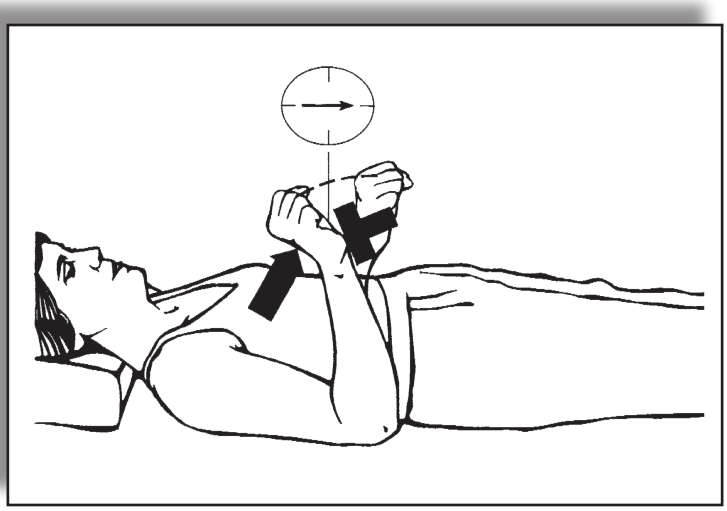
Muscles of the Wrist



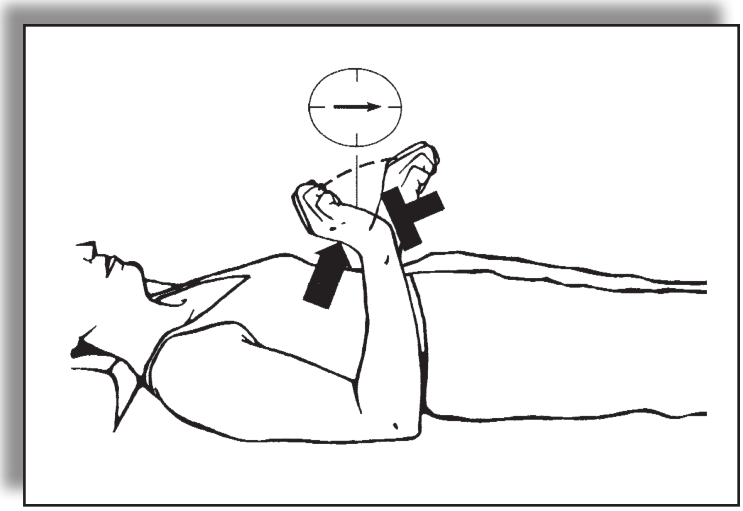
512 Extensor Carpi Ulnaris, Extensor Division



518 Extensor Carpi Radialis Longus, Abductor Div.



514 Extensor Carpi Radialis Brevis

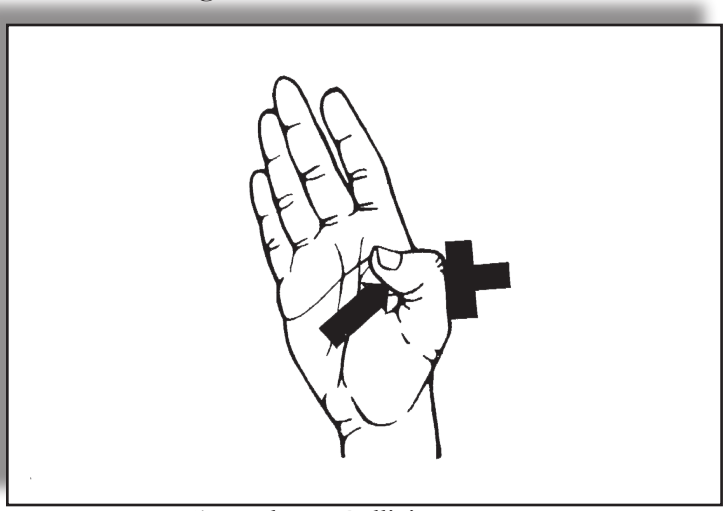


516 Extensor Carpi Radialis Longus, Extensor Div.

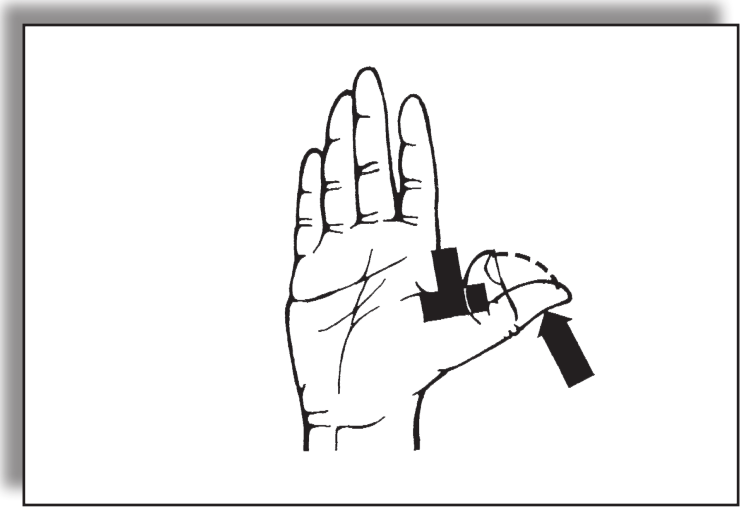
Section V

Muscles of the Thumb

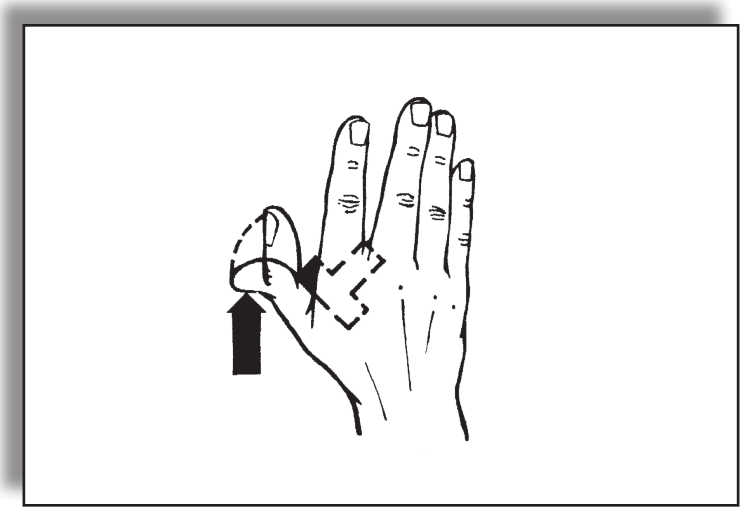
Distal Phalange



528 Flexor Pollicis Longus

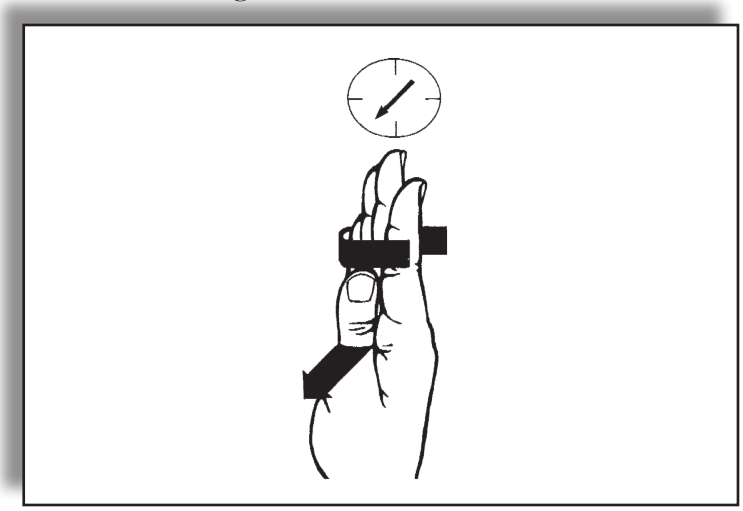


520 Extensor Pollicis Longus, Ulnar Division

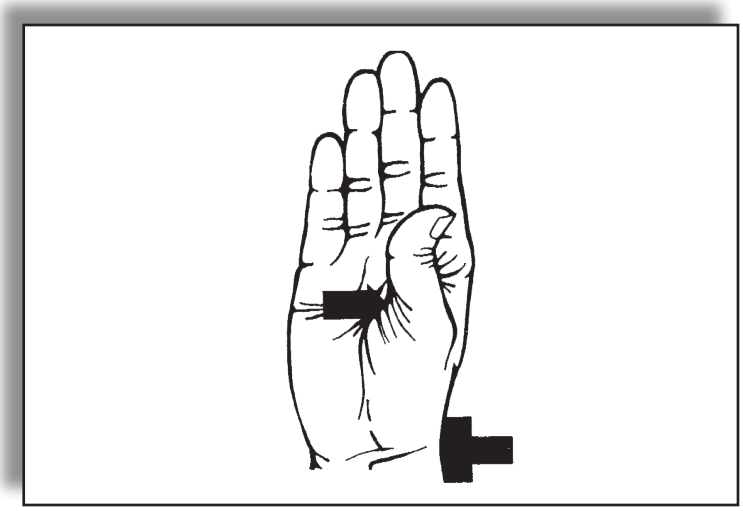


522 Extensor Pollicis Longus, Septal Division

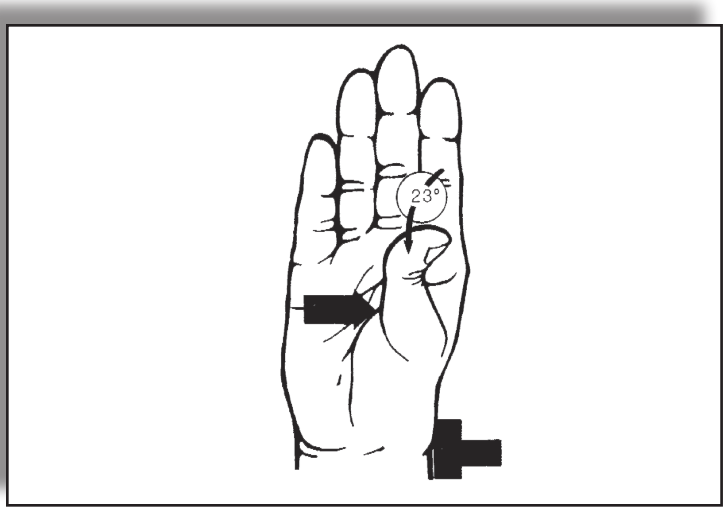
Proximal Phalange



536 Interossei Pollicis (Palmares, First Division)



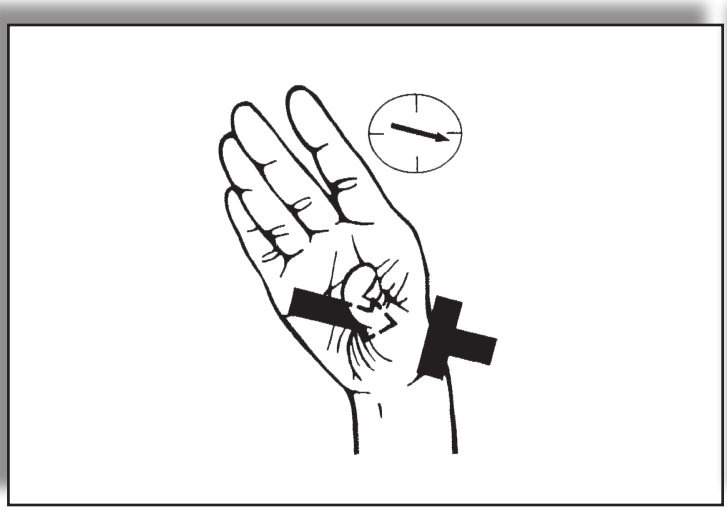
544 Adductor Pollicis Transversus



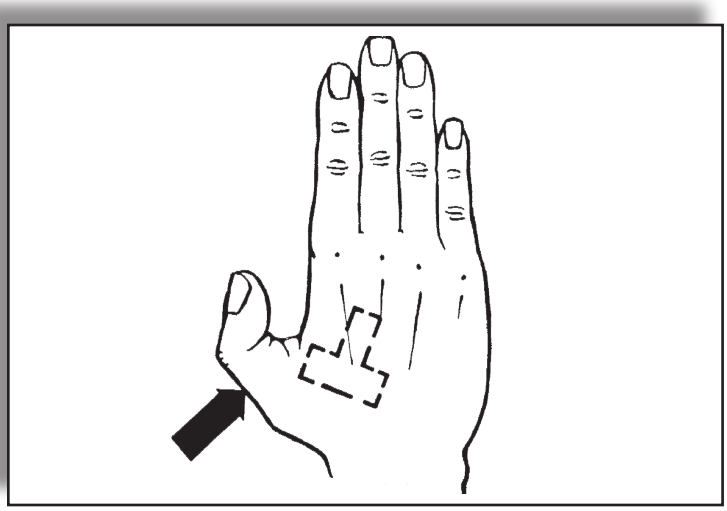
546 Adductor Pollicis Obliquus

Section V

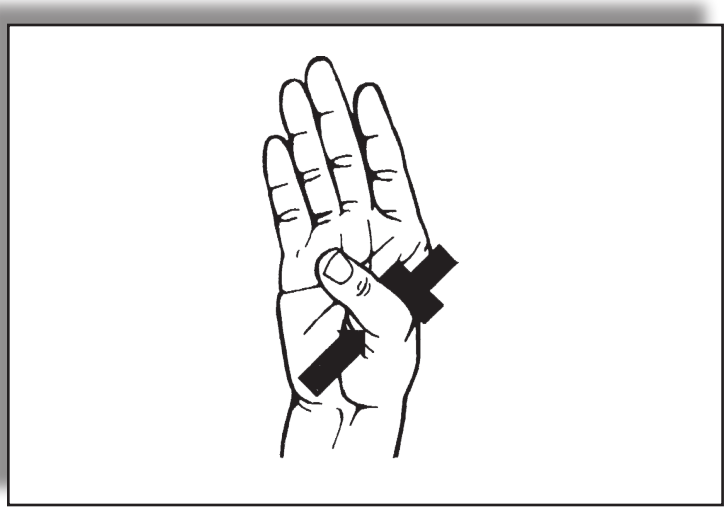
Muscles of the Thumb



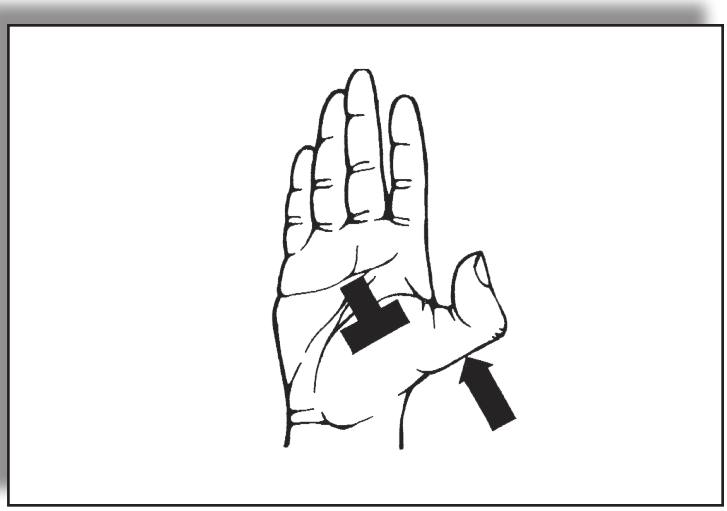
534 Flexor Pollicis Brevis



524 Extensor Pollicis Brevis, Radial Division



542 Abductor Pollicis Brevis

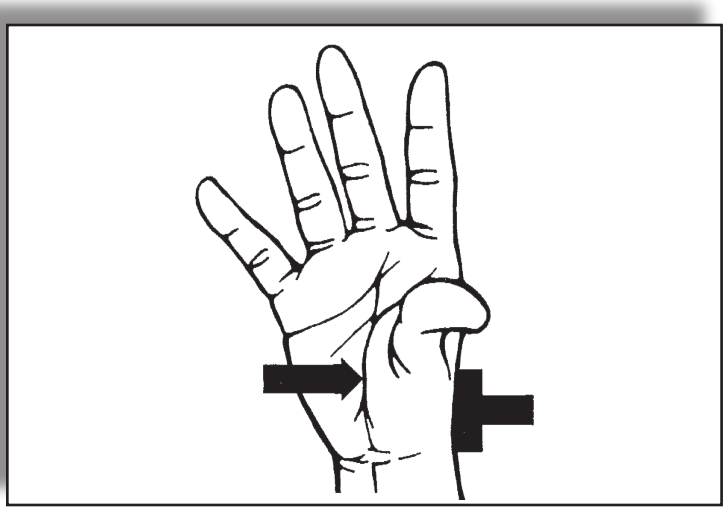


526 Extensor Pollicis Brevis, Septal Division

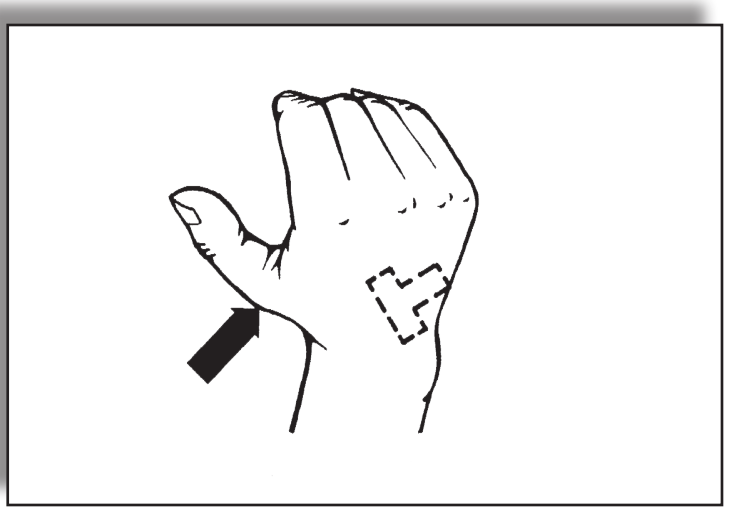
Section V

Muscles of the Thumb

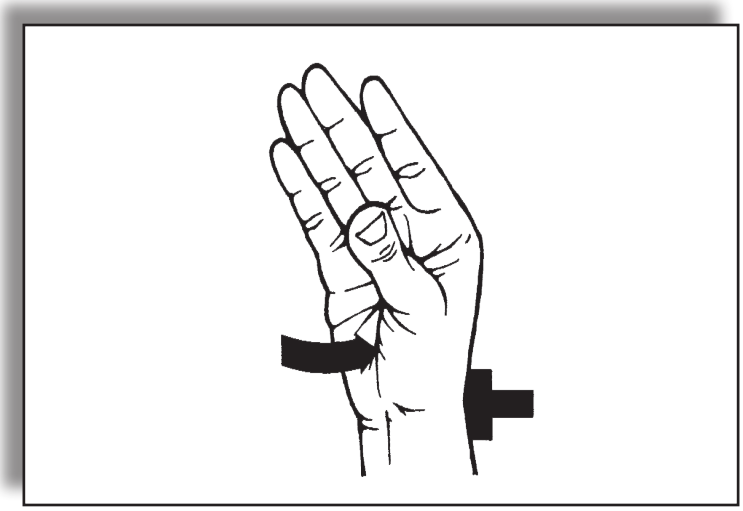
FIRST METACARPAL



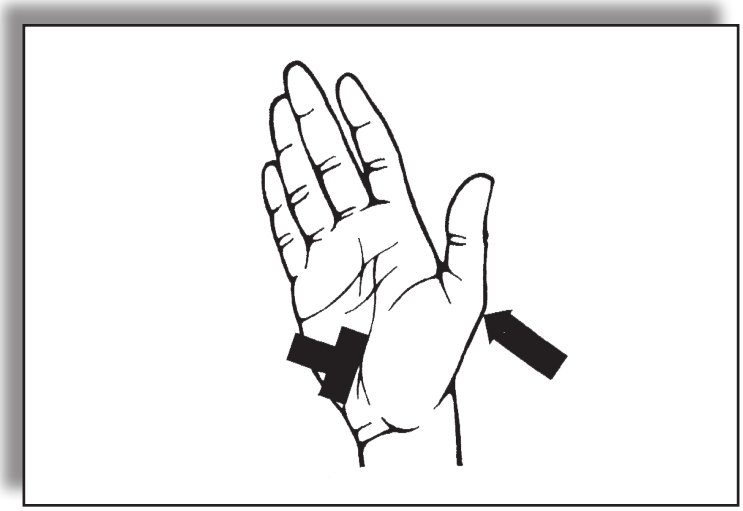
538 Opponens Pollicis , Flexor Division



530 Abductor Pollicis Longus, Ulnar Division



540 Opponens Pollicis, Abductor Division

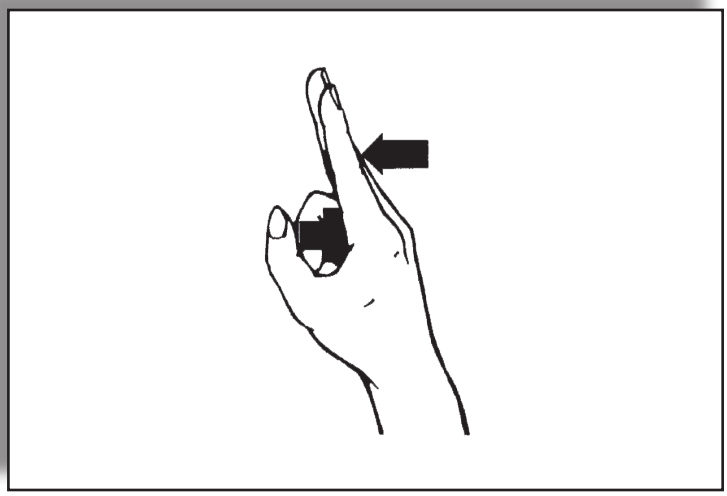


532 Abductor Pollicis Longus, Radial Division

Section VI

Muscles of the Finger

FINGERS (EXTENSORS)



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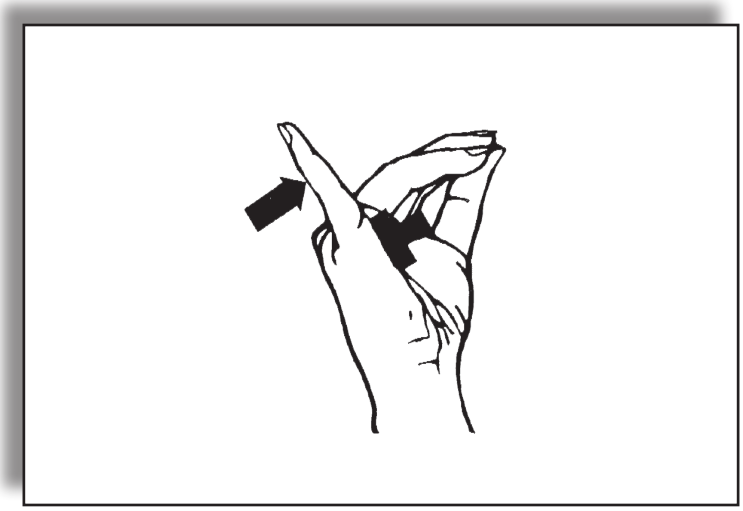

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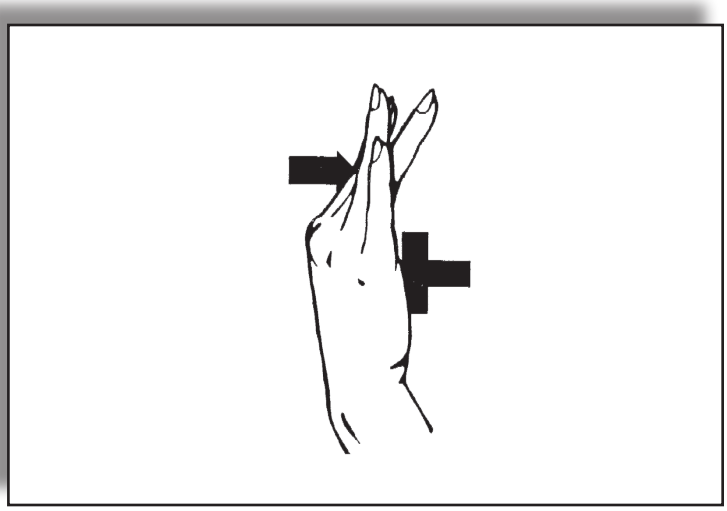

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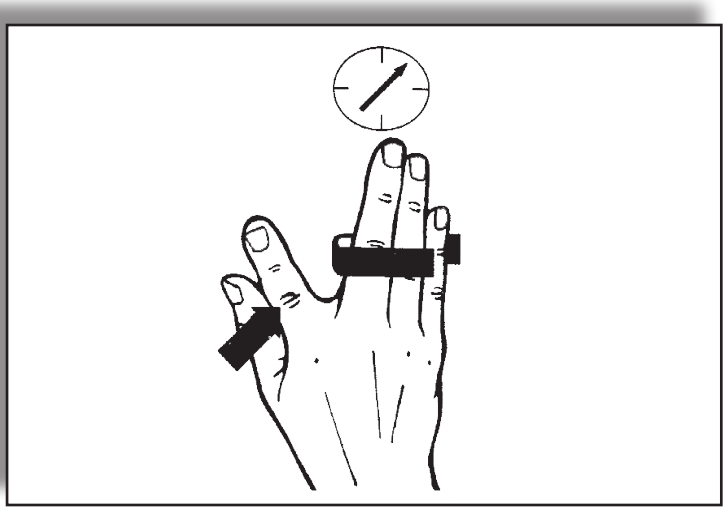
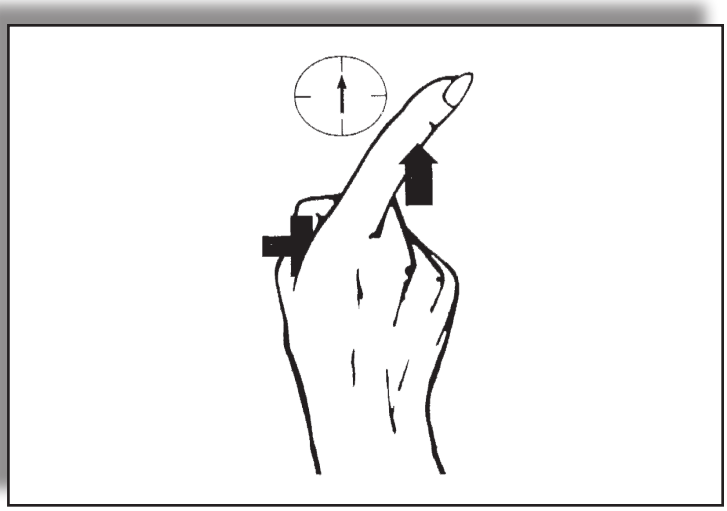
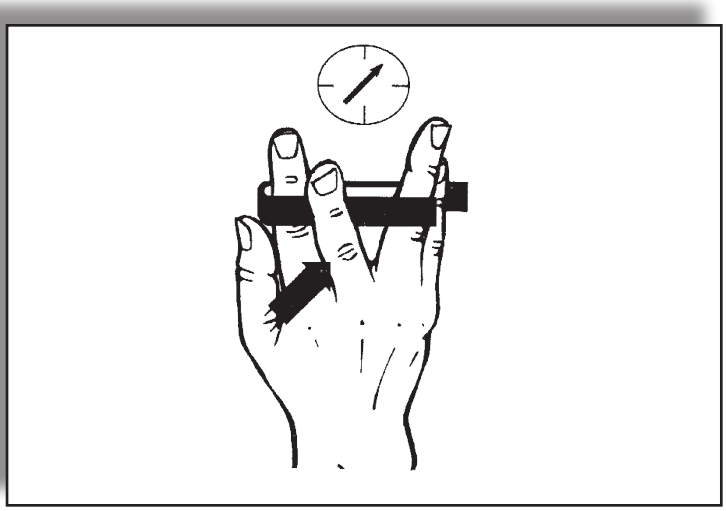


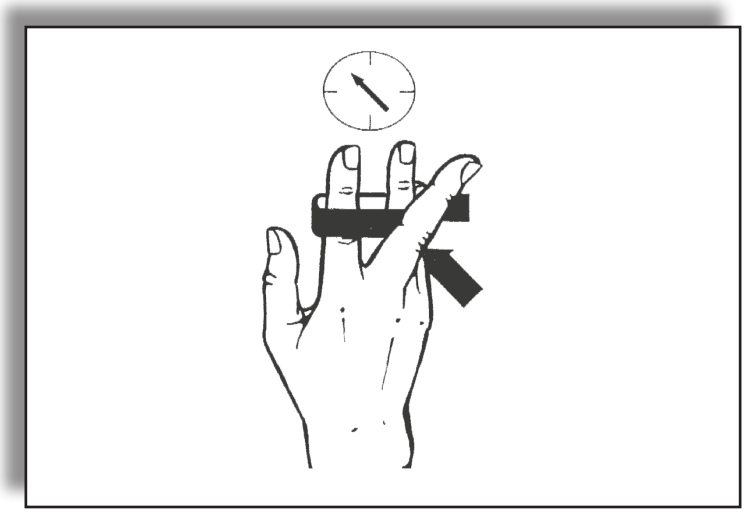
570 Interossei Dorsales Manus, First Division



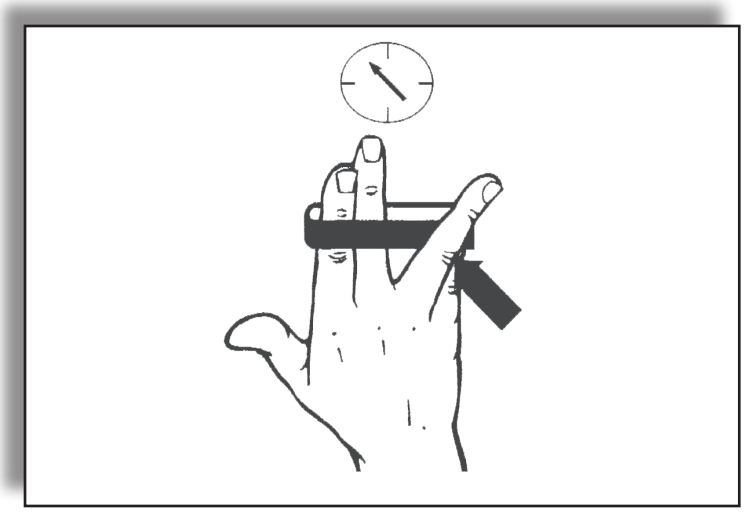
554 Extensor Indicis Proprius



568 Interossei Dorsales Manus, Second Division



566 Interossei Dorsales Manus, Third Division

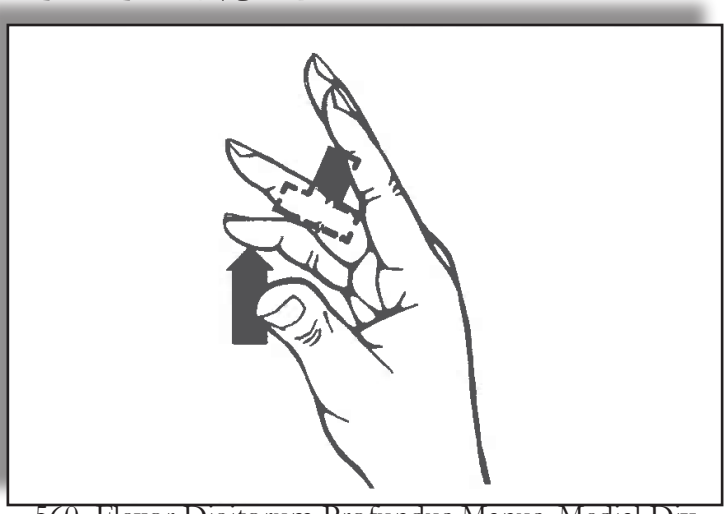


564 Interossei Dorsales Manus, Fourth Division

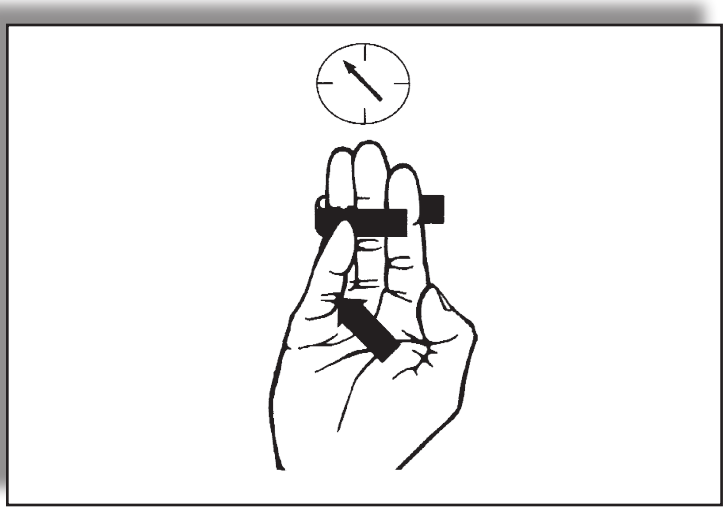
Section VI

Muscles of the Finger

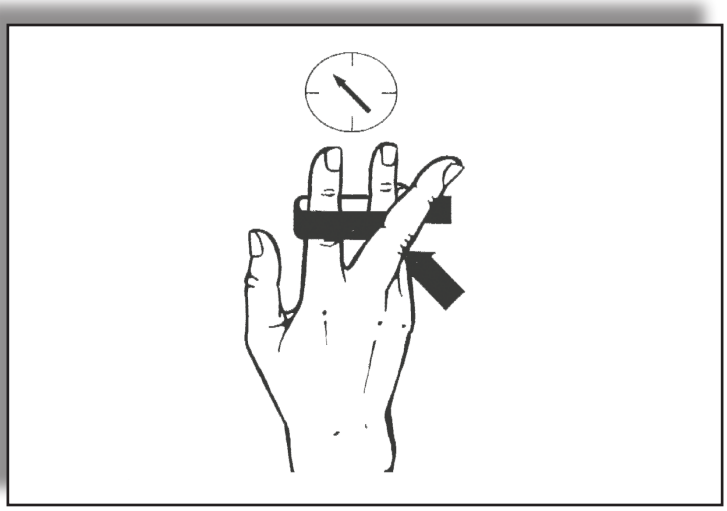
LITTLE FINGER



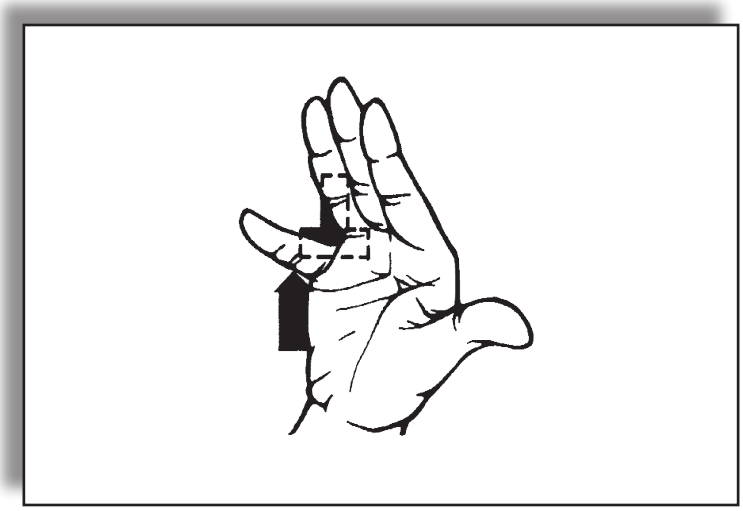
560 Flexor Digitorum Profundus Manus, Medial Div



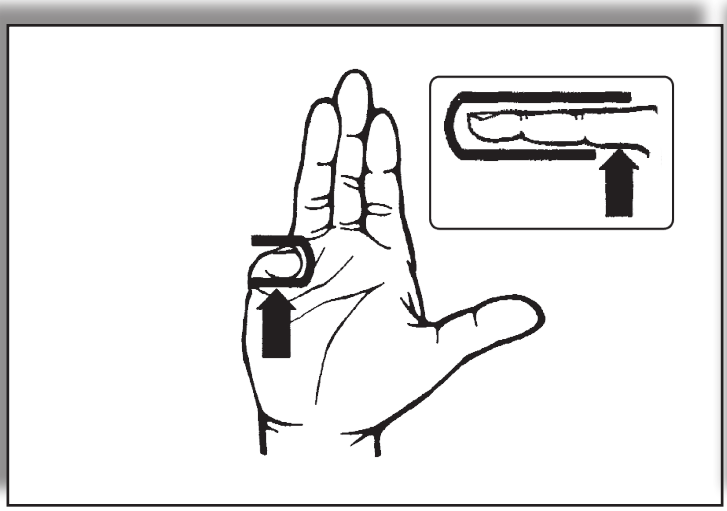
590 Interossei Palmares, Fourth Division



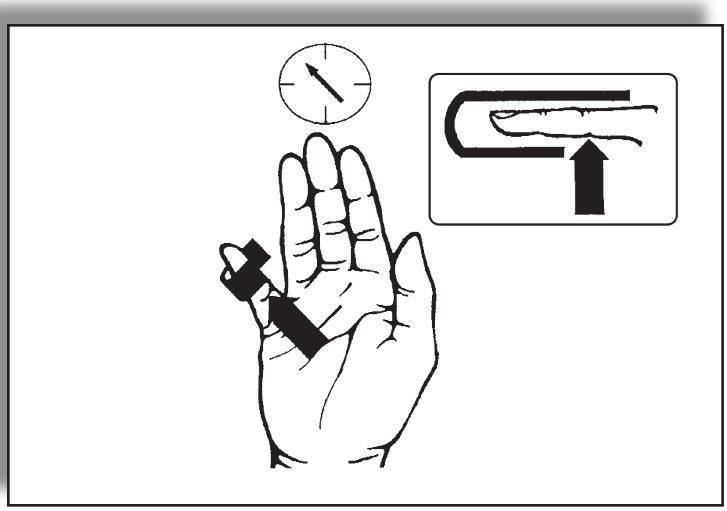
556 Flexor Digitorum Superficialis, Medial Division



580 Flexor Digiti Minimi Brevis Manus



572 Lumbricales Manus, Fourth Division

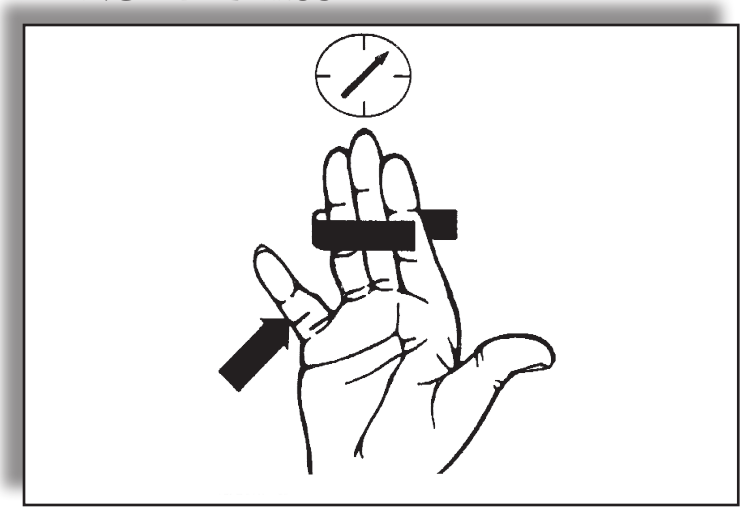


582 Abductor Digiti Minimi Manus, Flexor Division

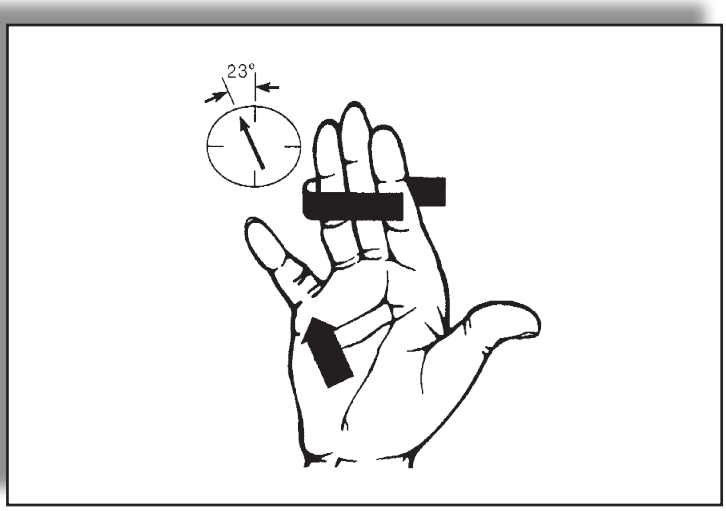
SECTION VI

Muscles of the Finger

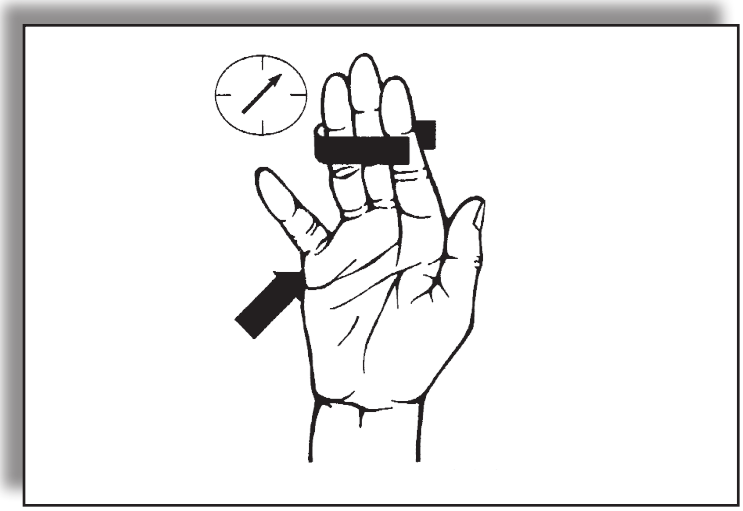
FINGER FLEXUS



584 Abductor Digiti Minimi Manus, Abductor Div



588 Opponens Digiti Minimi Manus, Flexor Division

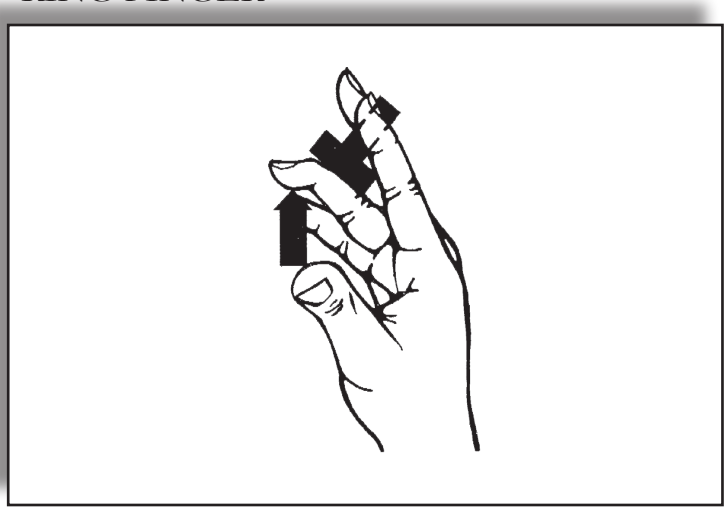


586 Opponens Digiti Minimi Manus, Abductor Div

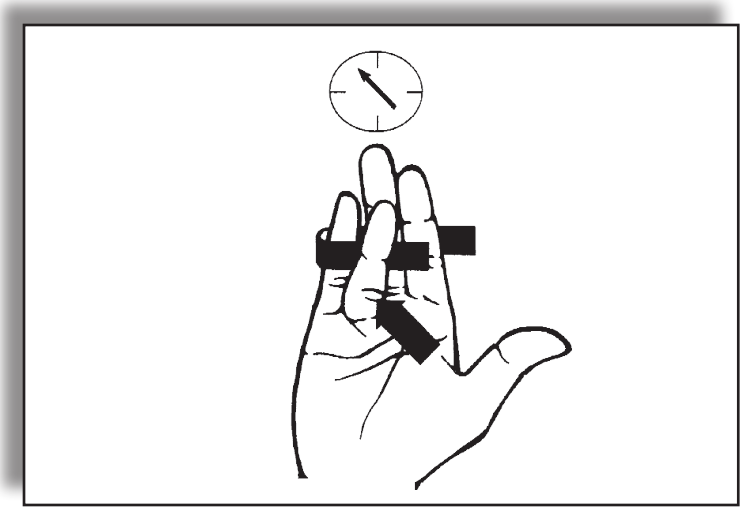
Section VI

Muscles of the Finger

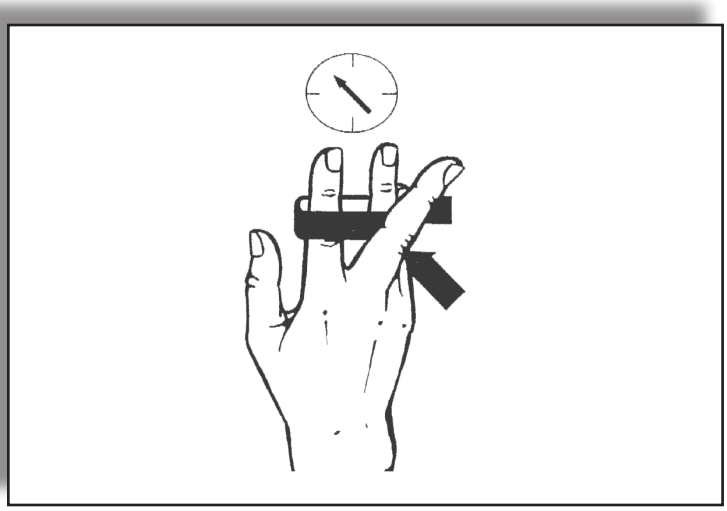
RING FINGER



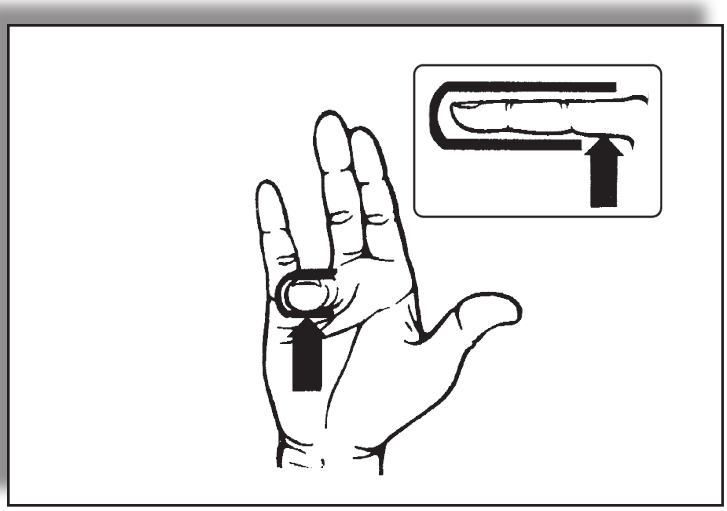
560 Flexor Digitorum Profundus Manus, Medial Div



592 Interossei Palmares, Third



556 Flexor Digitorum Superficialis, Medial Division

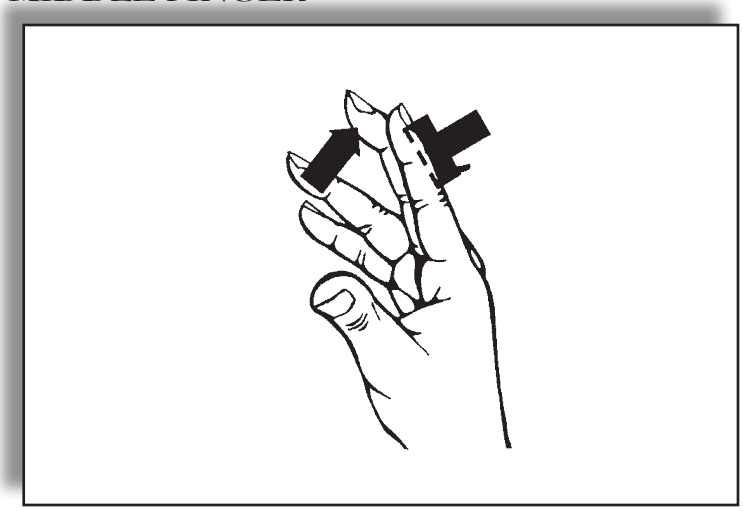


574 Lumbricales Manus, Third

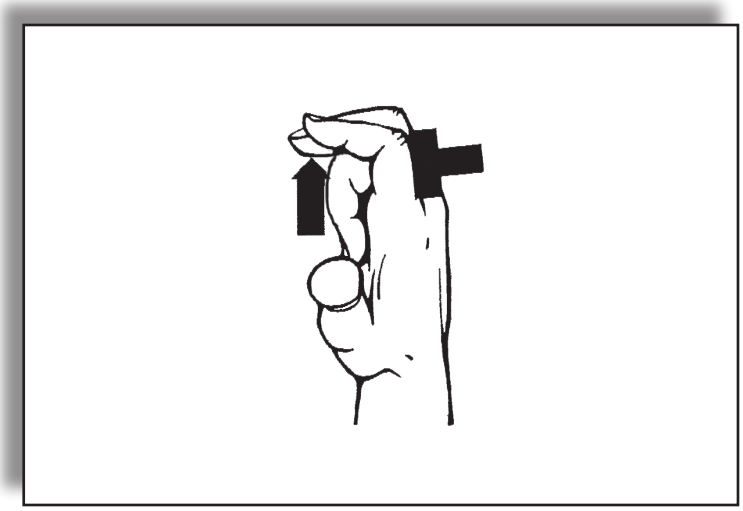
SECTION VI

Muscles of the Finger

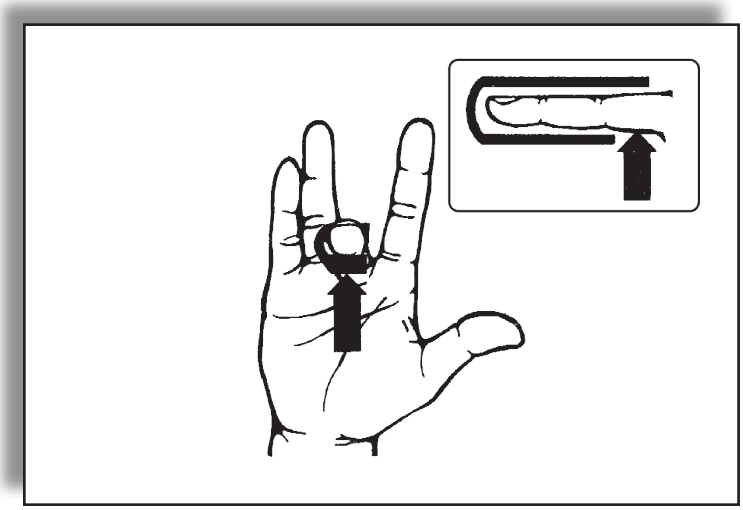
MIDDLE FINGER



562 Flexor Digitorum Profundus Manus, Lateral Div



558 Flexor Digitorum Superficialis, Lateral Division

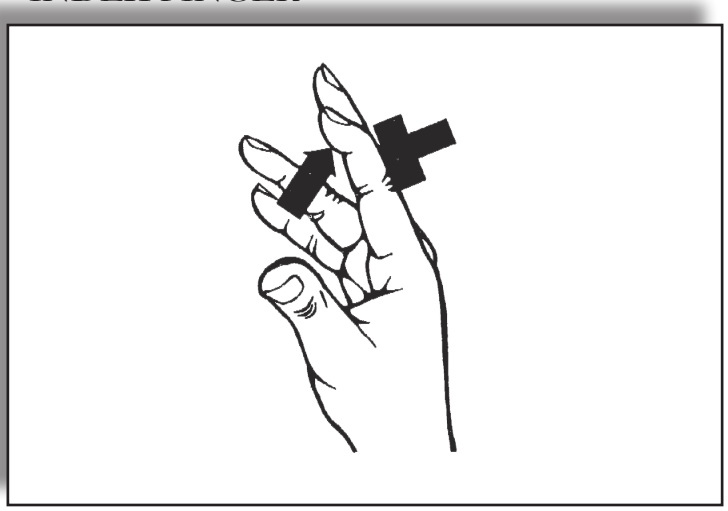


576 Lumbricales Manus, Second

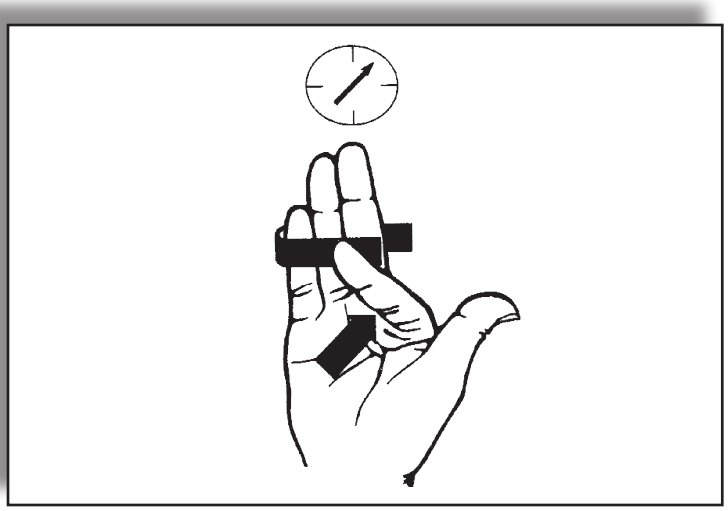
Section IV

Muscles of the Finger

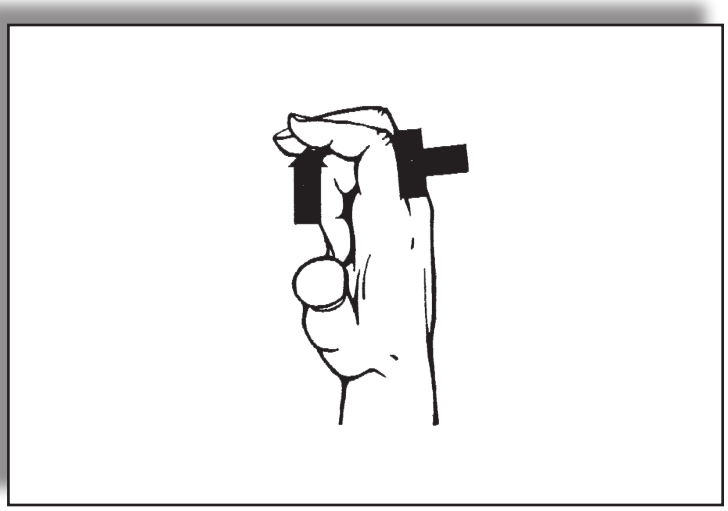
INDEX FINGER



562 Flexor Digitorum Profundus Manus, Lateral Div



594 Interossei Palmares, Second



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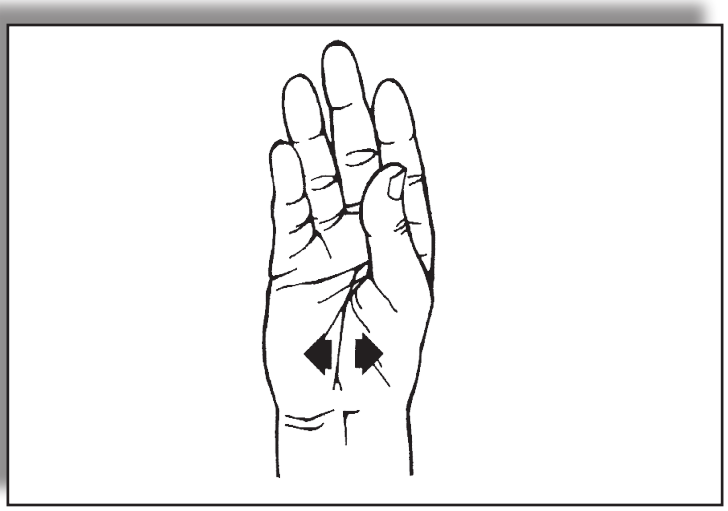
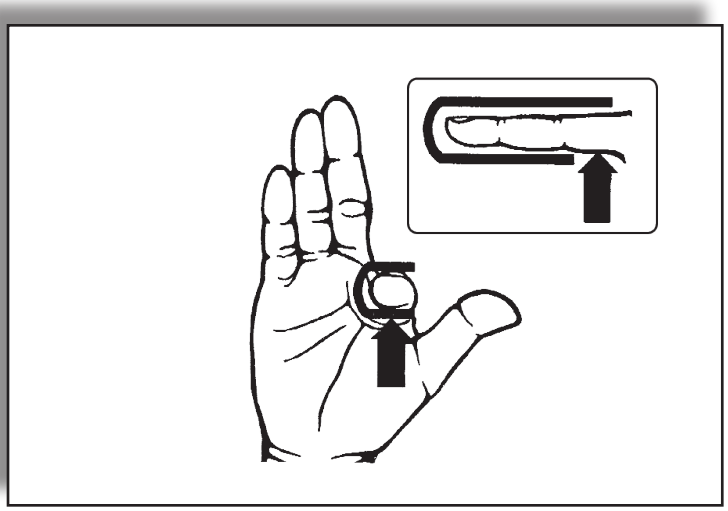


596 Palmaris Brevis



578 Lumbricales Manus, First

CHAPTER II

MUSCLES OF THE UPPER EXTREMITIES SHOULDER, FOREARM, AND HAND

Using The Clinical Kinesiology Workbooks

This Clinical Kinesiology workbook of the Upper Extremity covers the specific information necessary to test and evaluate 109 muscles. The major and most important portion of the workbook is the muscle worksheet. Each muscle is presented in a structured format to provide the necessary information to evaluate possible dysfunctions. The information is displayed on seven pictorial drawings which include a word description to properly identify the related local muscle reflexes. The meaning conveyed by each category is as follows:

Origin:	Indicates the area where the muscle origin is most effectively treated and will sometimes vary from the description commonly found in anatomy texts.
Insertion:	Indicates the area where the muscle insertion is most effectively treated.
Test:	Decribes the test position founf to be most practical and efficient in isolating a particular muscle on its divison.
Doctor:	Refers to the doctor (or one performing the test.)
Ipsilateral:	Refers to the muscle being tested on the same side of the body.
Contralateral:	Refers to the opposite side of the body to the muscle being tested.
Brace:	Refers to the area being held by the doctor to stabilize the patient for testing.
Contact:	Refers to the area contacted by the doctor in order to test for muscle contraction.

This manual contains several muscles which have divisions not presently accepted in medical texts. These divisions are an outgrowth of personal research obtained while observing patients, studying anatomy books, and dissecting cadavers.

Some divisions such as the Pectoralis Major, Clavicular Division and the Pectoralis Major, Sternal Division are already familiar to us. An additional division has been called the Pectoralis Major, Costal Division. These are the fibers that arise from the rib cage, and are tested differently and have proven to have different NV, NL, and Visceral Organs, etc. This same idea prevails throughout the muscle division.

Some divisions are named according to the action, i.e. flexion or abduction. Others are named because of the different origin, i.e. Supinator, Radial Division and Supinator, Ulnar Division. The first division was named for the fibers that arise from the Radius and the second division for the fibers that arise from the Ulna.

Procedure for Muscle Correction

Synchronous Pulse and Double-Fingered Contact:

Based upon clinical experience over many years, and the trial and error testing of many techniques, certain procedures have remained dominant as being most effective when treating a muscle on a local basis. This procedure is the use of a double-fingered bilateral contact. The contact is held until a synchronal pulse is felt. While stimulating any reflex point on the body, always use a two-fingered contact. This is a neutral contact as opposed to a positive or negative single finger contact.

On a local basis, a muscle is directly influenced by one or more of the following factors:

1. Neurovascular
2. Neurolymphatic
3. Visceral Organ Reflex
4. Muscle Acupuncture Point
5. Vertebral Level and Myomere
6. Cranial
7. Foot
8. Nutrition

1. Neurovascular:
   Description: NV points are generally found on the cranium.
   Discussion: Vascular beds of the muscle needing treatment are influenced by using the following procedure until a synchronous pulse is felt. A neurovascular reflex, which is generally located on the surface of the cranium, when activated by a light tugging double fingered contact with one hand and a rotary stimulating contact with the opposite hand at the origin of the muscle, will restore normal circulation to the area associated with that reflex. These contacts are ipsilateral. Fpllowing stimalation, hold until a until asynchronous pulse is detected

Note: Dr. George Goodheart is responsible for the development of the original neurovascular muscular relationships.

2. Neurolymphatic:
Description: NL points are generally found between the ribs.
Discussion: The lymphatics of the muscle being treated are influenced by using the following procedure until a synchronous pulse is felt. A neurolymphatic reflex, which is generally located in the rib cage, when activated by a rotary stimulating double fingered-contact with one hand and with a rotary simulating contact the opposite hand at the insertion of the muscle, will produce lymphatic flushing of the areas associated with that reflex. Both the right and the left muscle group are treated by using the same reflex. Following stimulation, hold until a synchronous pulse is detected.

Note: Dr. George Goodheart is responsible for the development of the original neurolymphatic muscular relationships.

3. Visceral Organ I and II:
Description: VOR I and II are the primary and secondary visceral organ reflexes.
Discussion: Somato-visceral influences and vicero-somatic reflexes are common feedback systems with the local computer. A muscle is primarily associated with two specific organs. They are listed as Visceral Organ I (VOR I) and Visceral Organ II (VOR II.) They are treated as follows: A VOR, which is generally located on the abdomen or other specific areas of the body, when activated by a rotary stimulating contact with one hand and a rotary stimulating contact with the opposite hand on the Muscle Acupuncture Point, will restore normal interaction between somato-visceral and viscero-somatic functions of the body. Following stimulation, hold until a synchronous pulse is detected.

4. Muscle Acupuncture Point:
Description: M.A.P. is a specific reflex for the muscle being tested and is located contralateral to the muscle being tested.
Discussion: Each muscle has a specific acupuncture point located on the opposite side, which acts as an energizer and a point of circuitry overload, located within or around the normal acupuncture points as previously described by Felix Mann. For treatment procedure, see VOR reflex.

5. Vertebral Level, Lovett Brother Vertebral Level and Myomere:
Discussion: VL and MM are two primary areas of neurological input from the spinal cord to each muscle. The first area is called the myomere and reflects areas of normal neurological innervation to a specific muscle. The vertebral level is a phenomenon not clearly understood but is frequently found associated with each muscle aberration. When either of these levels two-point as non-repiratory lesion (NRL), adjust the area as indicated and tap for recall. Occasionally it is necessary to pulse the MM or VL or both to the muscle.

6. Cranial:

Related extraspinal subluxation that occurs as a compensatory involvement in muscle aberration.

7. Foot:
   Related extraspinal subluxation that occurs as a compensatory involvement in muscle aberration.

8. Nutrition:
   Each muscle has a specific nutrient associated with it. Nutrition is indicated when the NL point is not NRL and the insertion of the muscle is NRL.

Priority Treatment

1. Test and record all weak muscles.
2. Use computer clear out technique (See Clearing Techniques in Instruction Manual.)
3. Retest the muscles to determine which one remained weak.
4. The weak muscle is considered a ONE-POINT.
5. Mark the major reflexes associated with the muscle-NV, NL, VOR I, VOR II, VL, LBVL, MM, Cranial, Foot and MAP.
6. Have the patient therapy localize (TL) each reflex point while testing the muscle. The reflex that causes the weak muscle to become strong is considered the TWO-POINT.
7. Check the TWO-POINT reflex to make sure it is NRL.
8. Treat the reflex that is the NRL in the appropriate manner. (See procedure for Muscle Correction.)
   NV - Origin
   NL - Insertion
   VOR I - MAP
   VOR II - MAP
   MAP - VOR I or VOR II
   VL - Adjust, then pulse to MM and/or to muscle
   MM - Adjust, then pulse to VL and/or to muscle
   Cranial - Adjust Cranium
   Foot - Adjust foot
9. If two reflex points are indicated as NRL's, use the THREE-POINT technique. The THREE-POINT technique helps to determine which of the major reflexes is to be treated. The procedure is as follows:
   a.) The weak muscle is the ONE-POINT.
   b.) The reflex point that strengthens the muscle is the TWO-POINT.
   c.) While the patient TL's the reflex point that strengthened the weak muscle, if any other reflex point changes the indicator muscle, it is considered the THREE-POINT and the major point to be treated.

New Muscle Study Format

Most anatomical texts study muscles based on the location of the muscle belly. Thus muscles of the forearm are all the muscles whose anatomical muscle fibers are between the elbow and the wrist. In this manual, muscles will be listed and grouped according to their insertion. The insertion of a muscle is where the affect of muscle contraction is most optimally seen. As Kinesiologists, we are primarily interested in muscle action and its measurement.

For ease of understanding, the muscles are listed by insertion and then subdivided into muscles that have similar origin. For example, the first group of muscles presented is Muscles of the Shoulder that insert on the Scapula, with an origin on the spine (i.e. all divisions of Trapezius.) The second group is the Muscles of the Shoulder that insert on the Scapula, with an origin on the rib cage (i.e. Anterior Serratus, Pectoralis Minor, etc.)

Once the logical arrangement of the muscles has been made, a computer number has been assigned. These numbers will be in the general area of previous computer numbers but are now in a new order. The previous numbers were based on a sequence of muscle tests which have now been modified as research has progressed. The only exception to this numbering rule is the muscles that are located in the cervical muscle group, (i.e. Upper Trapezius, Omohyoideus, and Platysma.)

Section I:

Shoulder

Muscles Of The Shoulder That Insert On The Scapula

Origin: Spine

1. 270 Upper Trapezius, Scapular Division
2. 272 Upper Trapezius, Clavicular Division
3. 390 Trapezius, Middle Division
4. 392 Trapezius, Lower Division
5. 394 Levator Scapula, Superior Division
6. 396 Levator Scapula, Inferior Division
7. 398 Rhomboid Minor
8. 400 Rhomboid Major

Origin: Ribs

9. 402 Serratus Anterior, Superior Division
10. 404 Serratus Anterior, Inferior Division
11. 406 Pectoralis Minor, Superior Division
12. 408 Pectoralis Minor, Inferior Division

Origin: Hyoid

13. 306 Omohyoideus

Muscles Of The Shoulder That Insert On The Clavicle

Origin: Mandible

1. 288 Platysma, Posterior Division
2. 286 Platysma, Anterior Division

Origin: Ribs & Sternum

3. 410 Subclavius, Clavicular Division
4. 412 Subclavius, Scapular Division

Muscles Of The Shoulder That Insert On The Humerus

Origin: Spine

1. 414 Latissimus Dorsi, Thoracic Division
2. 416 Latissimus Dorsi, Lumbar Division
3. 418 Latissimus Dorsi, Iliac Division

Origin: Scapula

(Superior To Spine Of Scapula)

4. 420 Supraspinatus, Spine Division
5. 422 Supraspinatus, Fossa Division

(Inferior To Spine - Scapula Fossae)

6. 424 Infraspinatus, Superior Division
7. 426 Infraspinatus, Middle Division
8. 428 Infraspinatus, Inferior Division
9. 430 Teres Minor
10. 432 Teres Major, Superior Division
11. 434 Teres Major, Inferior Division
12. 436 Subscapularis, Superior Division
13. 438 Subscapularis, Third Division
14. 440 Subscapularis, Second Division
15. 442 Subscapularis, Inferior Division

(Coracoid Process Of Scapula)

16. 444 Coracobrachialis, Coracoid Division
17. 446 Coracobrachialis, Septal Division

(Deltoids Of Scapula)

18. 448 Deltoideus, Posterior, Medial Division
19. 450 Deltoideus, Posterior, Lateral Division
20. 452 Deltoideus, Middle, Posterior Division
21. 454 Deltoideus, Middle, Anterior Division
22. 456 Deltoideus, Anterior, Scapular Division

Origin: Clavicle

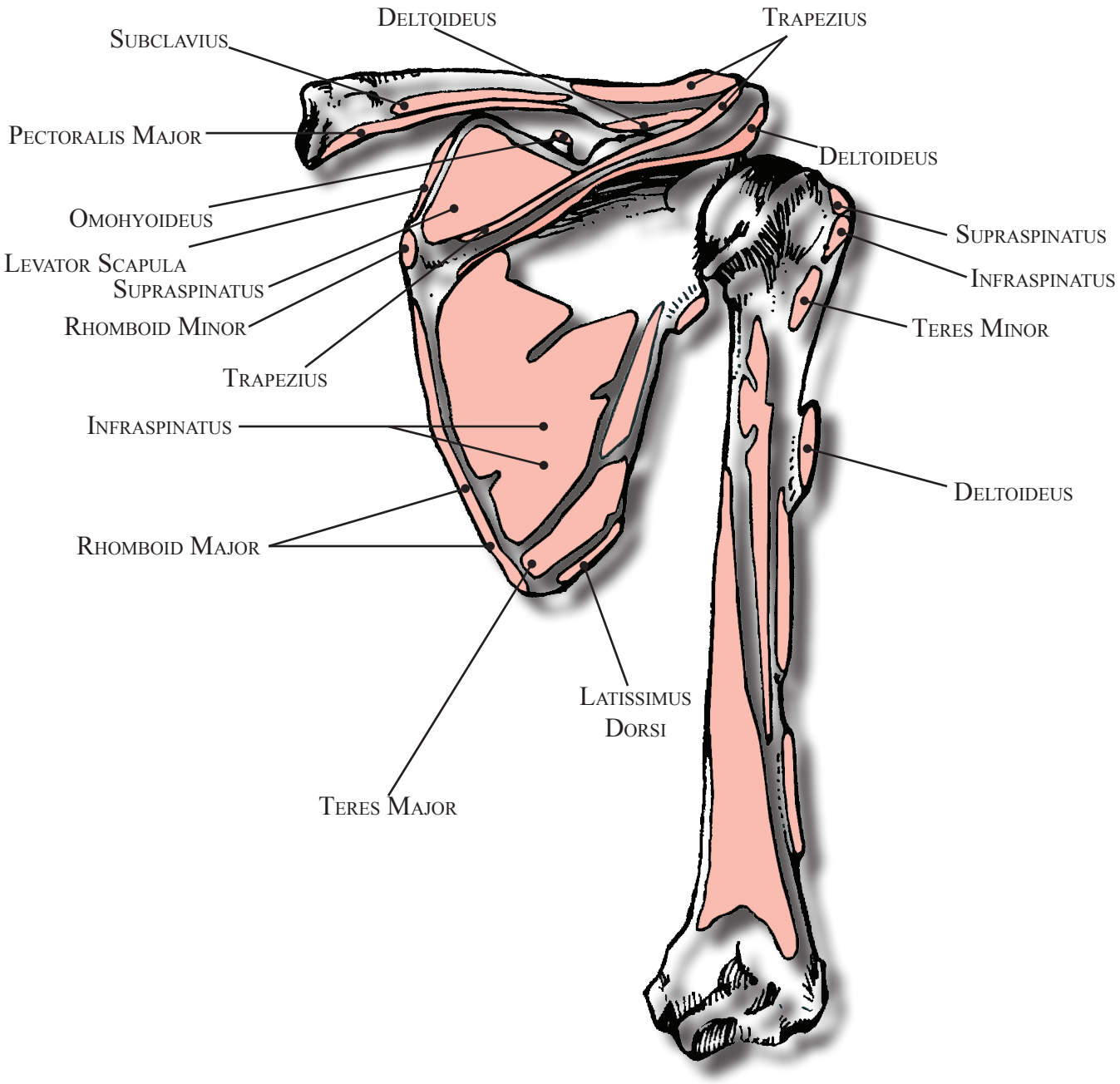
23. 458 Deltoideus, Anterior, Clavicular Division
24. 460 Pectoralis Major, Clavicular Division

Origin: Sternum & Ribs

25. 462 Pectoralis Major, Sternal Division
26. 464 Pectoralis Major, Costal Division

Origin and Insertion

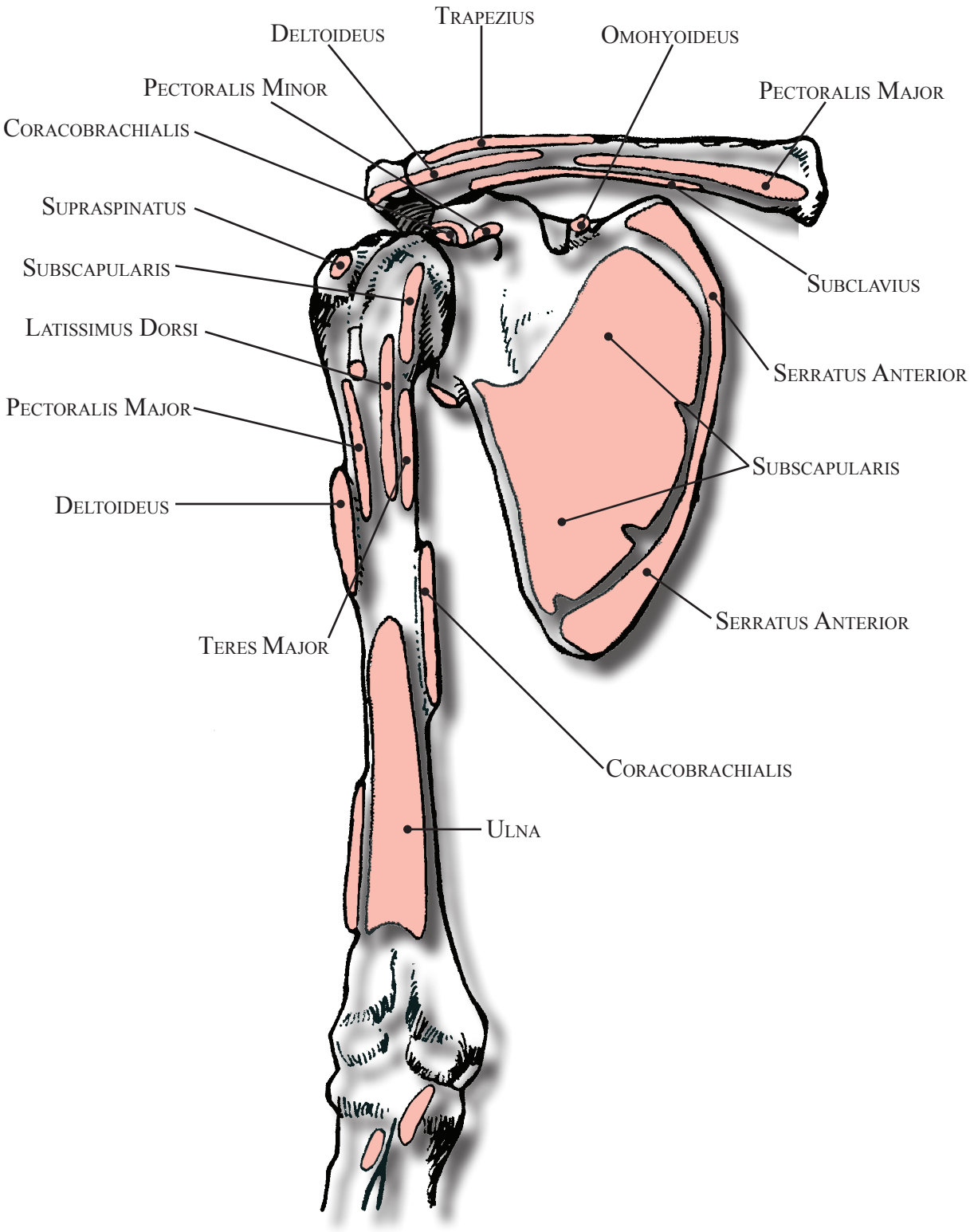
Shoulder Muscles



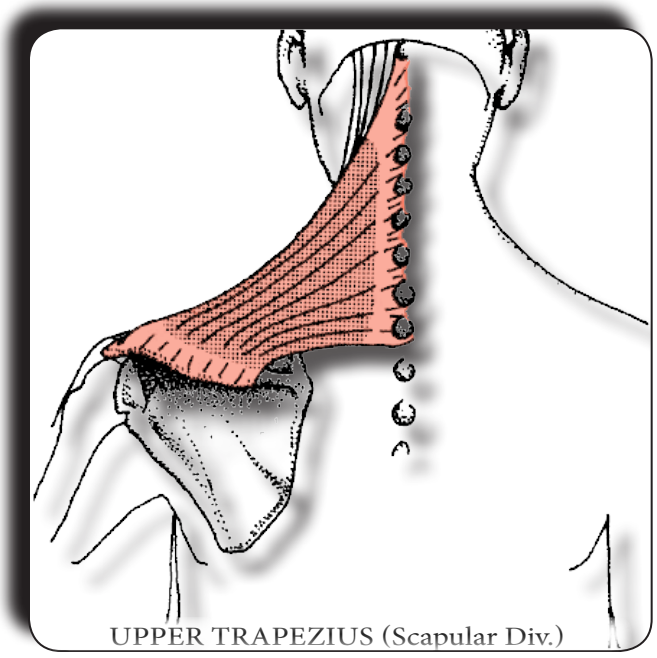
Posterior View of Right Shoulder

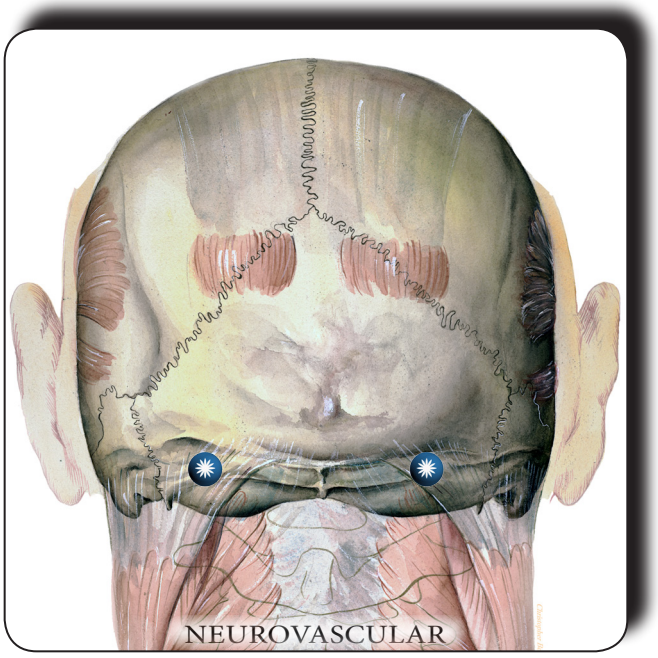
Origin and Insertion

Shoulder Muscles



Anterior View of Right Shoulder


UPPER TRAPEZIUS (Scapular Div.)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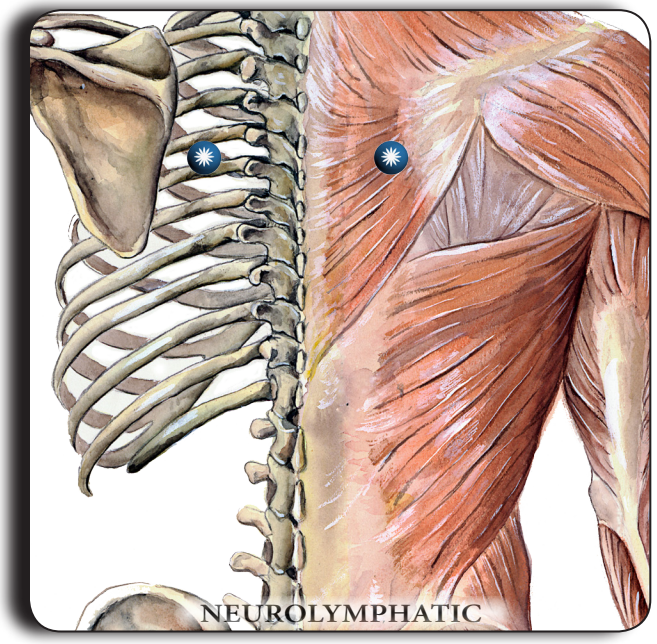
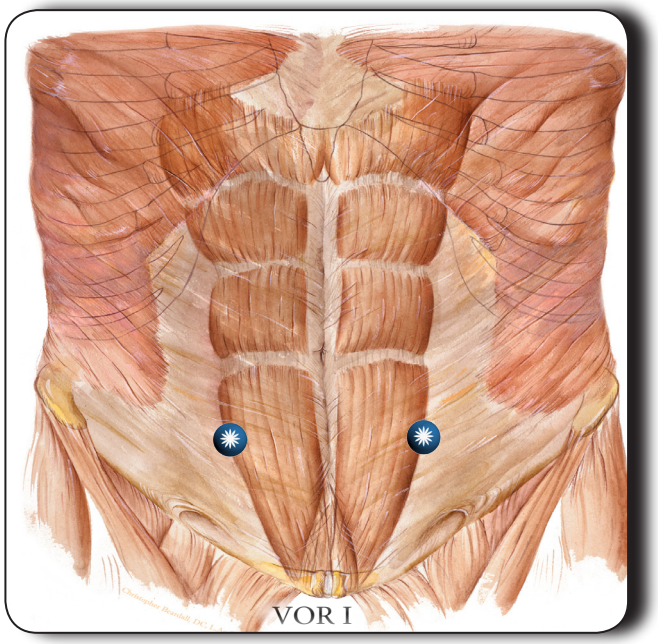
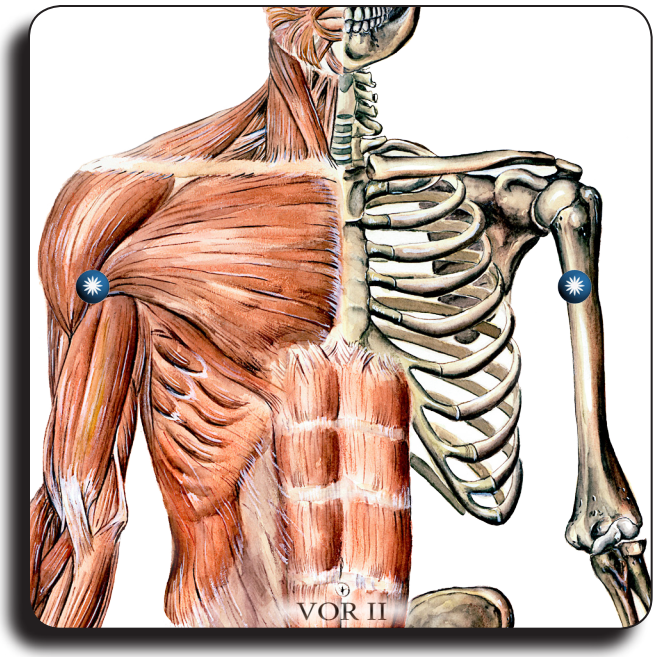
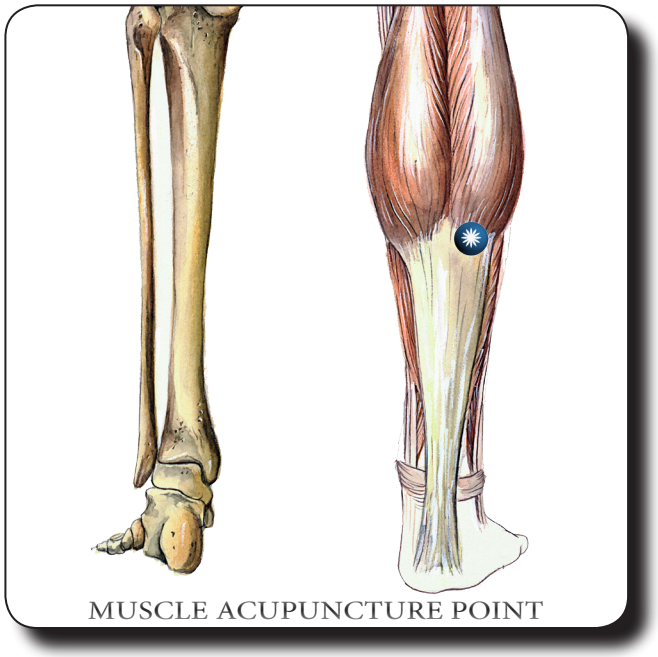

NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 270: UPPER TRAPEZIUS, (Scapular Division)

ORIGIN: Ligament nuchae and spinous process of C7.

INSERTION: Superior surface acromion process of scapula.

ACTION: With the neck fixed, abducts the scapula drawing it medially toward the cervical column.

TEST:

Patient: Supine. Flex arm on shoulder 45 degrees, abduct arm 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Dorsum of forearm, adduct through coronal plane toward midline.

NEUROVASCULAR: (Post/BL) Occipital bone, supra-occipital groove, 1" medial to occipital-mastoid suture, 1/2" superior to base of skull.

NEUROLYMPHATIC: (Post/BL) 5th ICS, 2' lateral to spine.

VISCERAL ORGAN:

I. *Colon*: (Ant/BL) Rectus Abdominis, first section, lateral border.

II. *Eye*: (Ant/BL) Humerus, anterior aspect, insertion of the Pectoralis Major, bicipital groove.

M. A. P. : B58 (Post) lateral inferior aspect of the calf.

V.L. : L2L

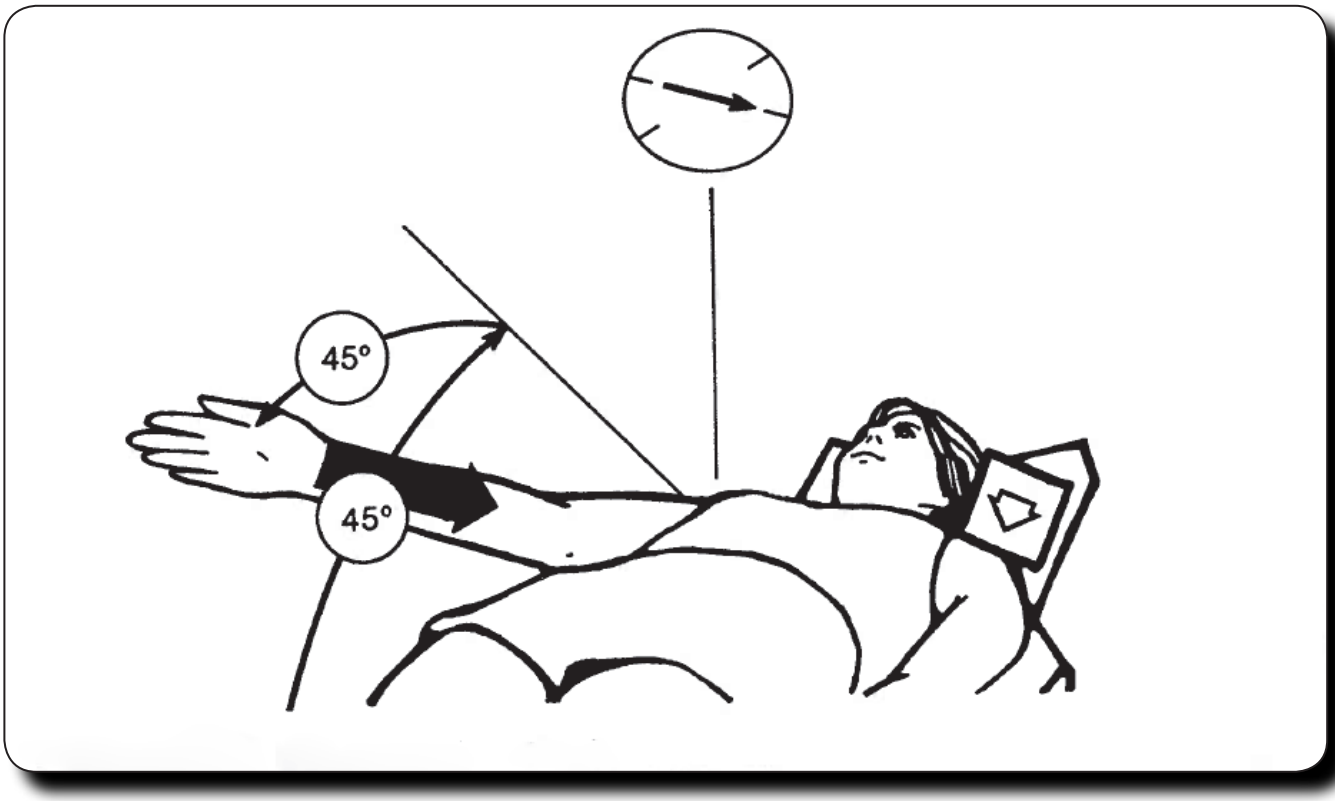
L. B. V.L. : C4L

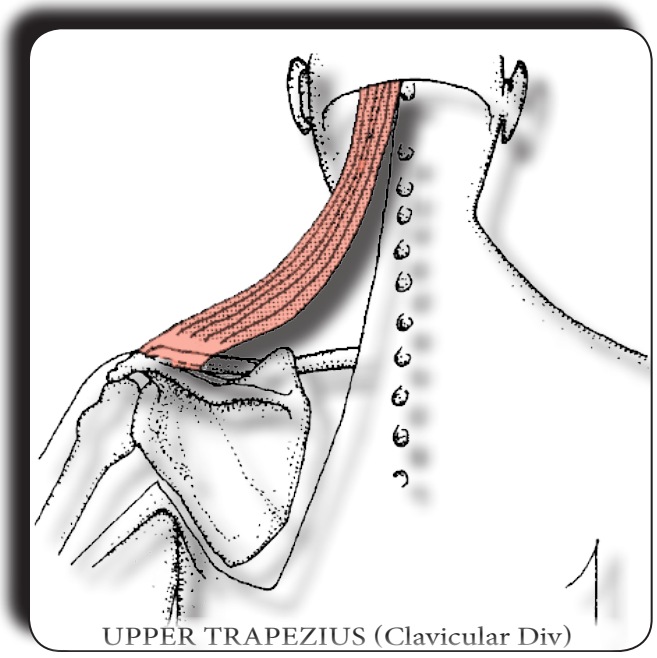
M. M. : C2

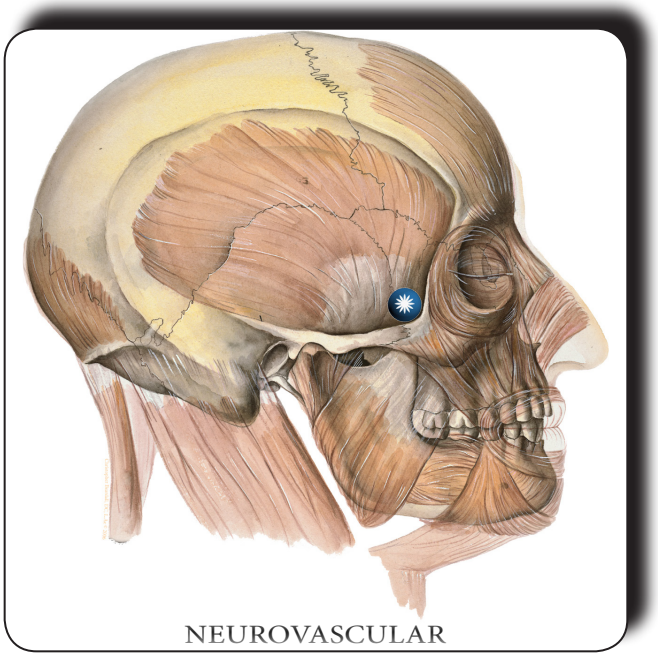
CRANIAL: Occiput

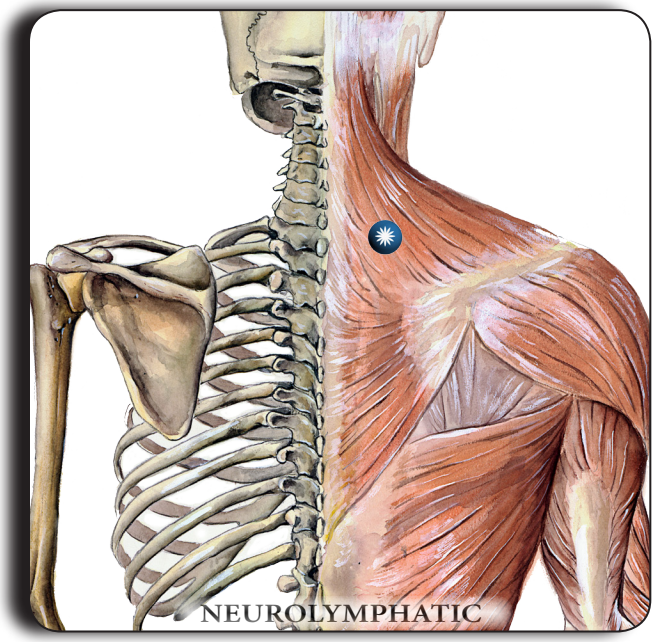
FOOT: Calcaneus

NUTRIENT SOURCE: Selenium
1. Core Selenium (NW)
2. Iodomere (S)

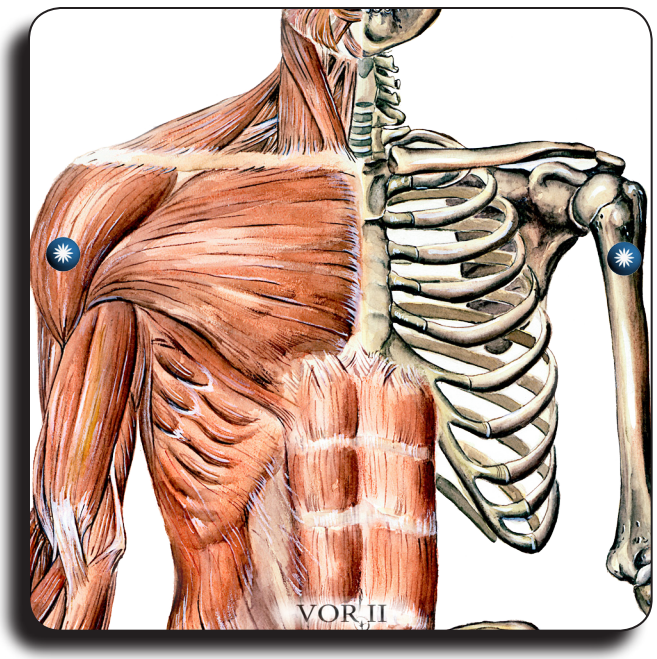


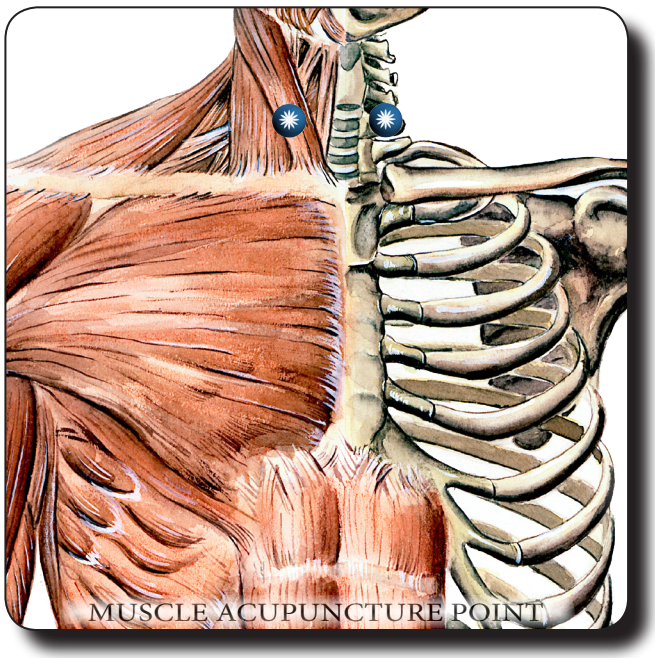

UPPER TRAPEZIUS (Clavicular Div)


NEUROVASCULAR


NEUROLYMPHATIC

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 272: UPPER TRAPEZIUS, (Clavicular Division)

ORIGIN: EOP, medial third of the superior nuchal line of the occiput.

INSERTION: Lateral third of clavicle.

ACTION: With the occiput fixed, abducts the clavicle. With the shoulder fixed, draws the occiput toward the shoulder.

TEST:

Patient: Supine. Flex Arm 180 degrees. Abduct arm 60 degrees. Rotate arm internally until thumb faces anterior.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Radial aspect of forearm and adduct arm through coronal plane toward feet.

NEUROVASCULAR: (Lat) Cranium, lateral aspect, temporal sphenoid suture just superior to zygomatic process.

NEUROLYMPHATIC: (Post/R) 1st ICS, 1" lateral to spine .

VISCERAL ORGAN:

I. *Thymus:* (Post/BL) Neck, posterior, superior aspect, transverse of C2 just lateral to B10.

II. *Internal Ear:* (Ant/BL) Humerus, anterior superior aspect, distal third of medial side of bicipital groove.

M. A. P. : St10 (Ant) medial to SCM

V.L. : T10L

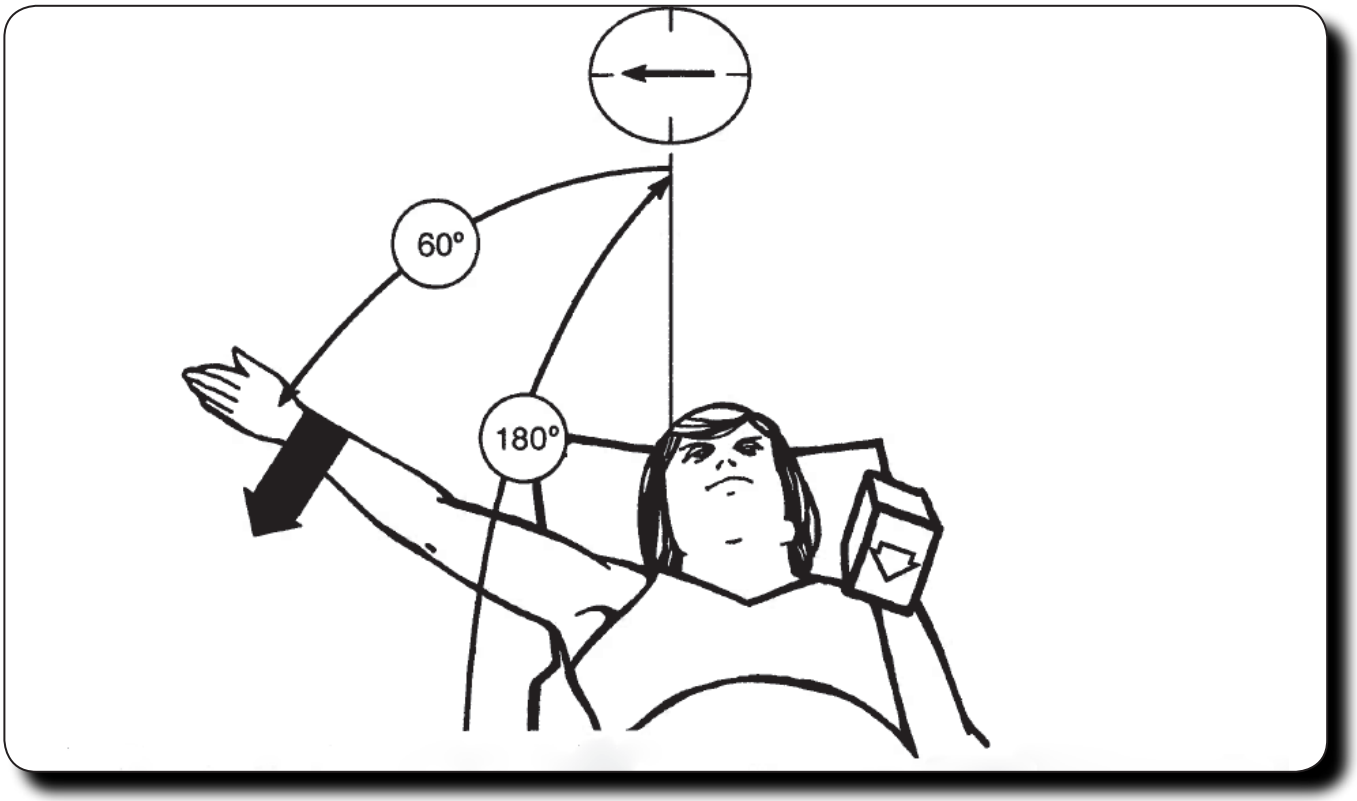
L. B. V.L. : T1L

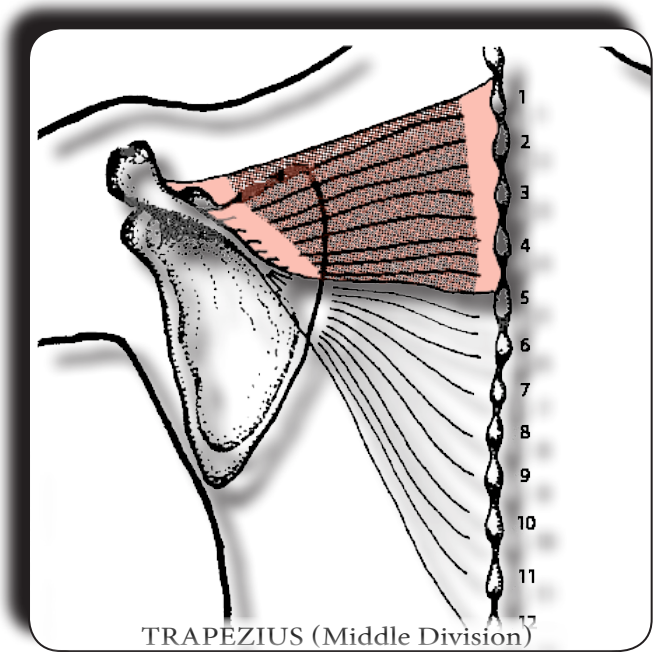
M. M. : C3

CRANIAL: Maxillary-AP

FOOT: 3rd Metatarsal

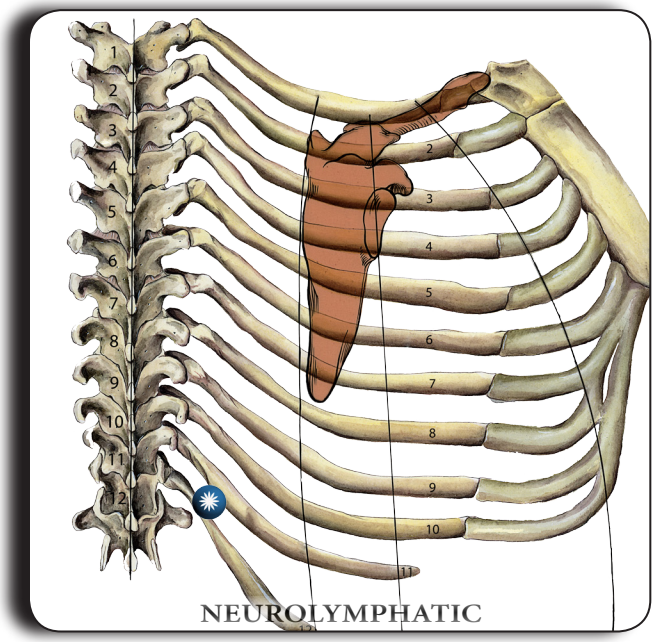
NUTRIENT SOURCE: Calcium
1. Core Calcium
2. Core Bone Matrix



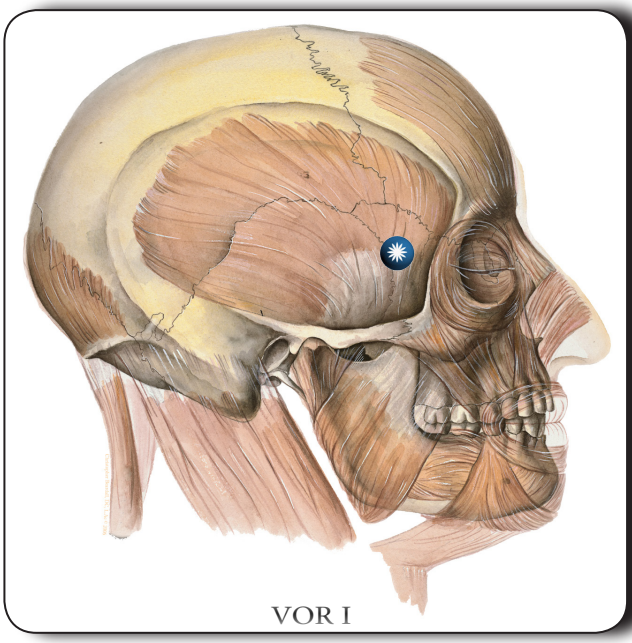


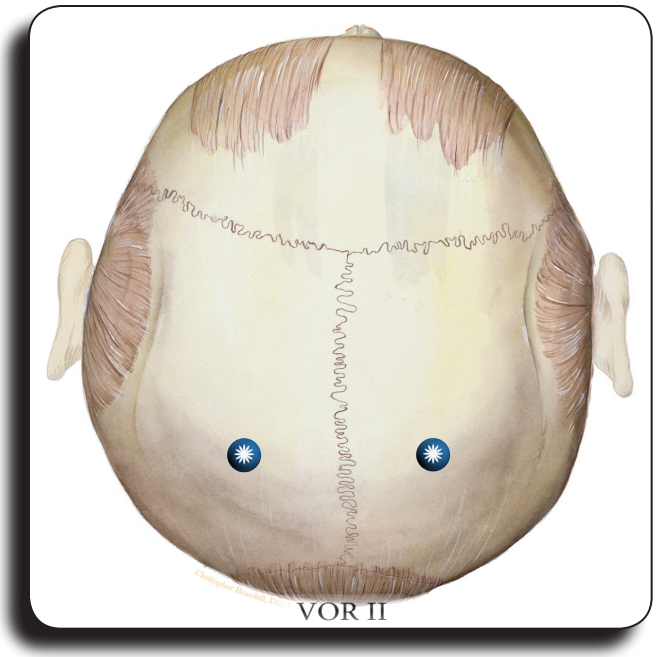
TRAPEZIUS (Middle Division)

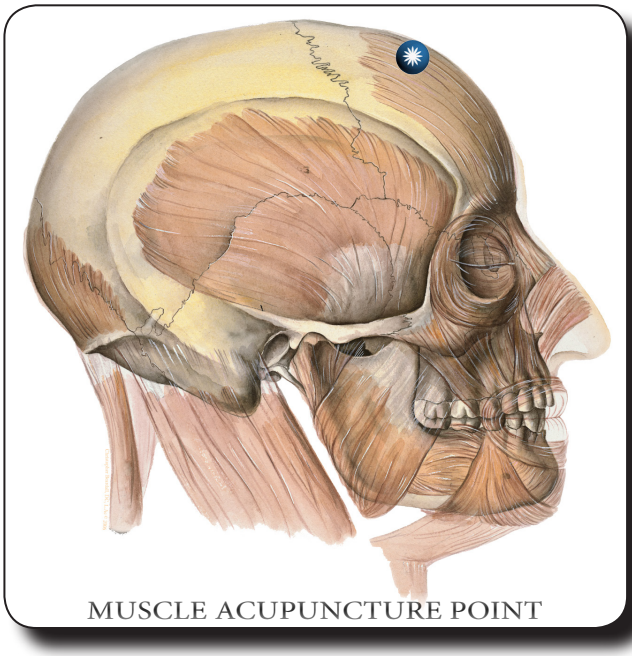
NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 390: TRAPEZIUS, (Middle Division)

ORIGIN: Spinous process of T1 - T5

INSERTION: The medial third of the superior lip of the posterior border of the spine of the scapula.

ACTION: Primary action is scapula adduction (draws scapula toward spinal column).

TEST:

Patient: Supine. Flex humerus on shoulder 90 degrees. Externally rotate arm until palmar surface of hand faces across body.

Doctor: Position: Either Ipsilateral or Contralateral.
Brace: Contralateral shoulder.
Contact: Dorsum of forearm to adduct arm across body through a coronal plane.

NEUROVASCULAR: (Ant/BL) Maxillary bone, 1" below eye orbit, and 1" lateral to nose.

NEUROLYMPHATIC: (Post/R) 11th ICS, 2" out from spine.

VISCERAL ORGAN:

I. *Posterior Pituitary:* (Lat/BL) Cranium, lateral aspect, greater wing of Sphenoid.

II. *Ear:* (BL) Cranium, superior aspect, halfway between fontanelles, 1 1/2" lateral to sagittal suture.

M. A. P. : G22

V.L. : C7R

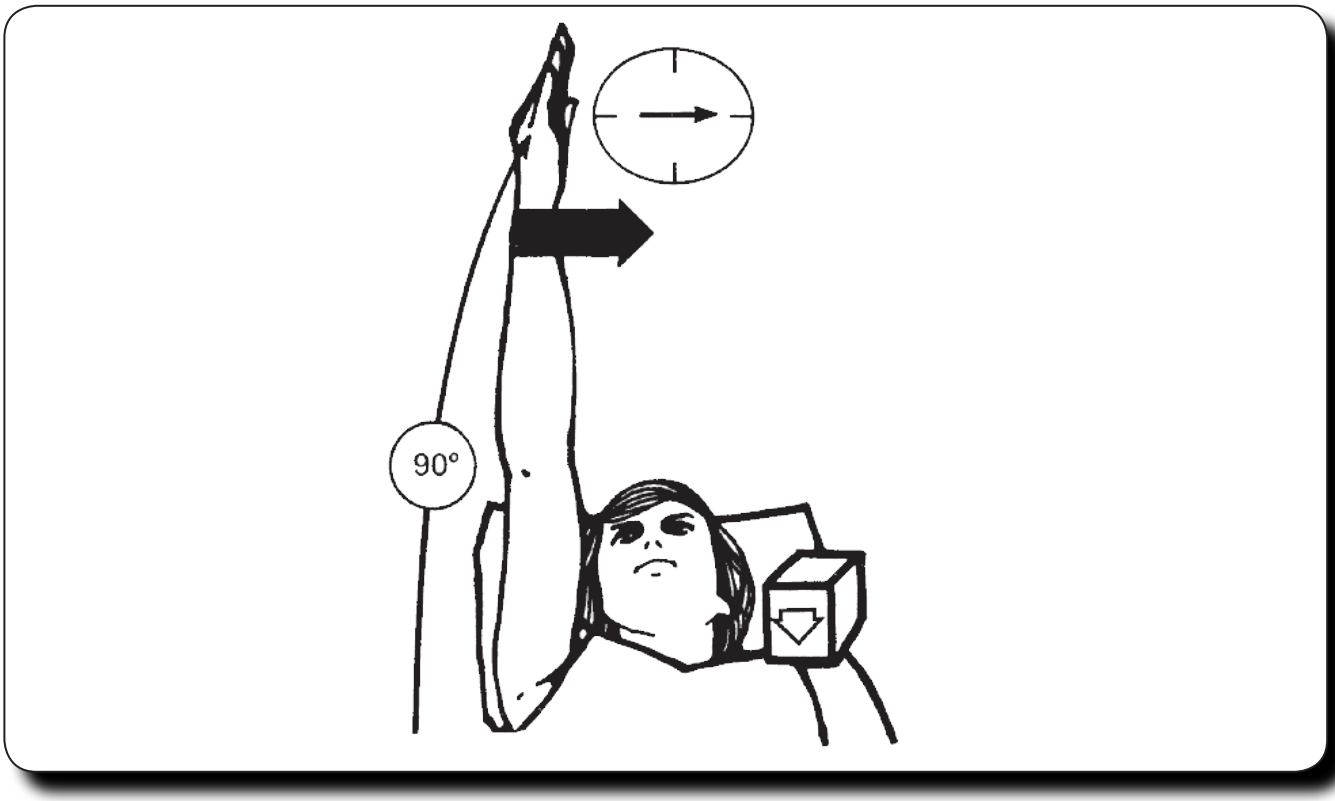
L. B. V.L. : T11R

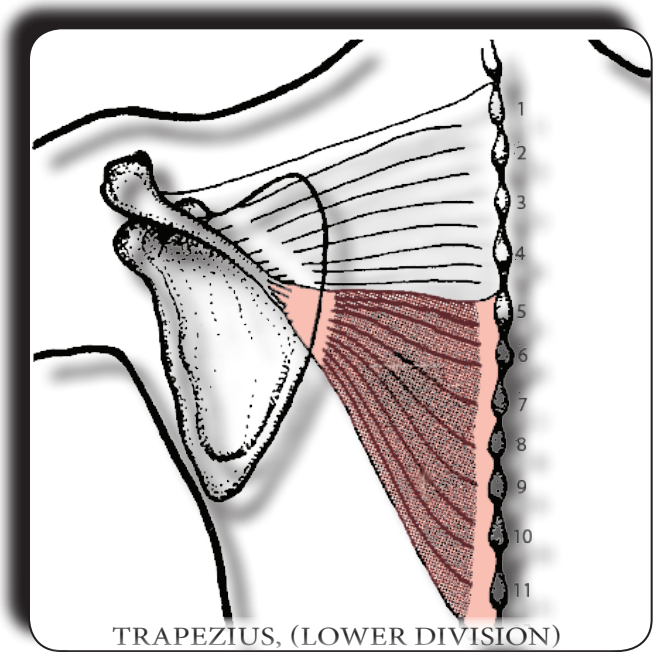
M. M. : C3

CRANIAL: Maxillary

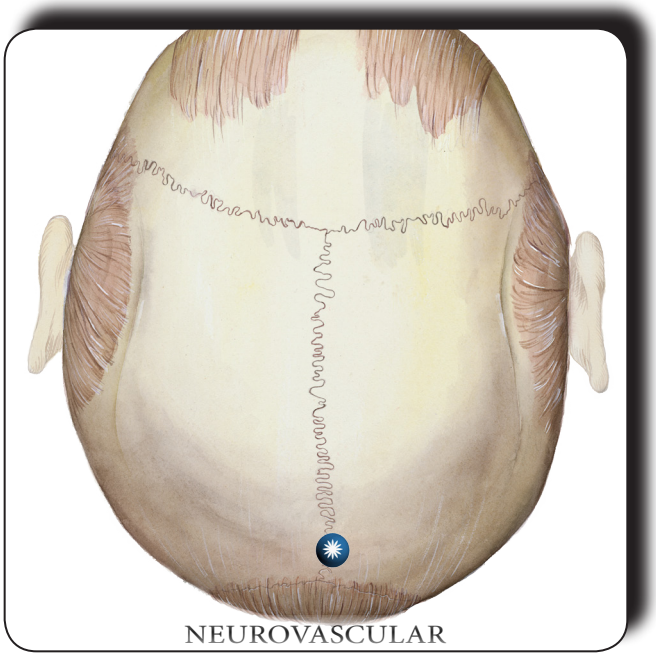
FOOT: 5th Metatarsal

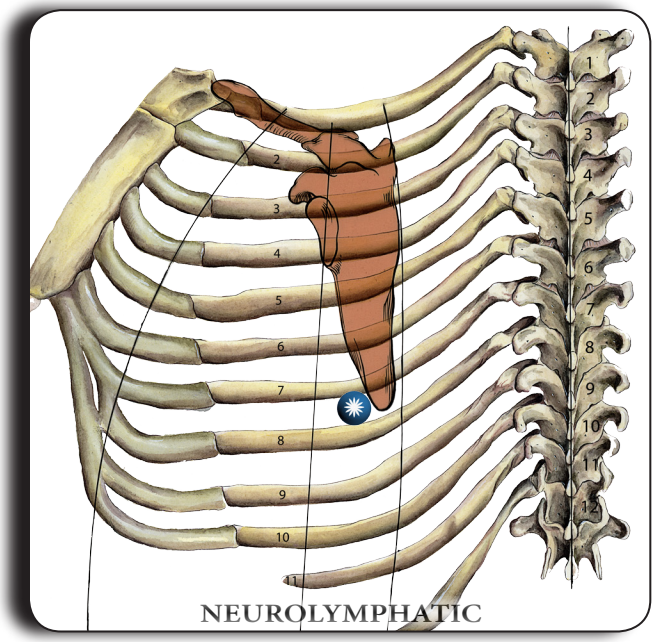
NUTRIENT SOURCE:
1. Pituitrophin (S)
2. Prolantrophic (ND)
3. Pitglan Whole (VM)



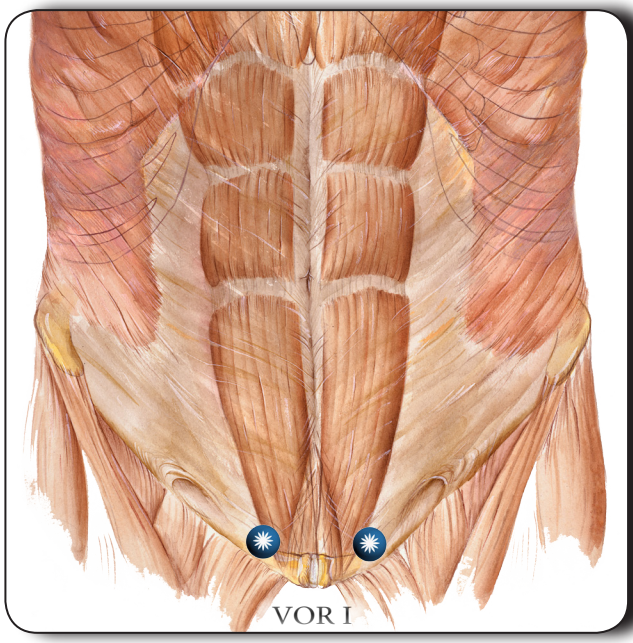


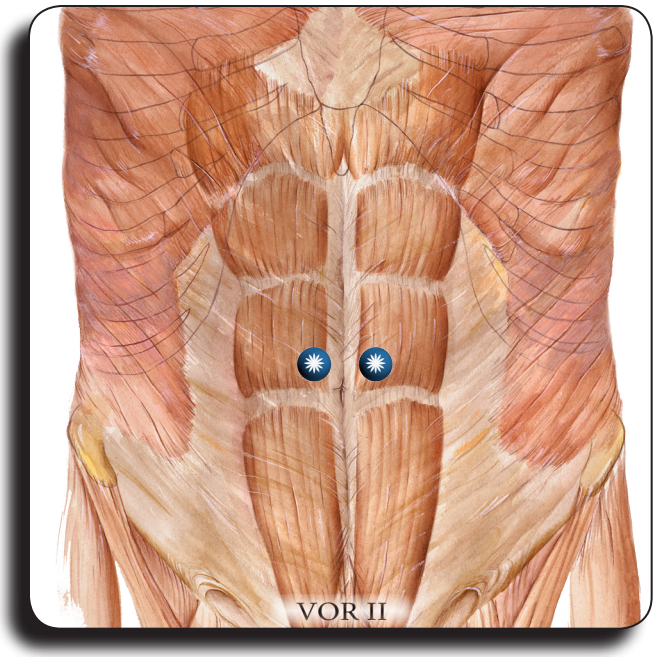
TRAPEZIUS, (LOWER DIVISION)

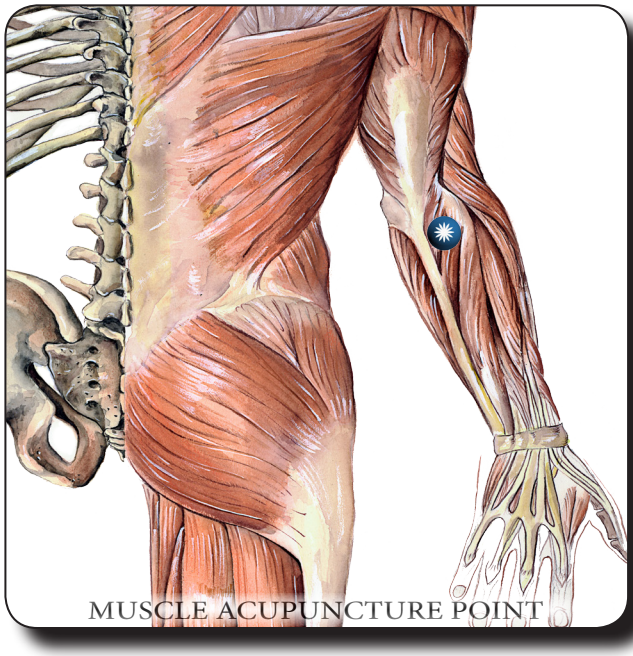

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 392: TRAPEZIUS, (Lower Division)

ORIGIN: Spinous process of T5 - T12.

INSERTION: Passes into an aponeurosis which inserts into a tubercle at the medial end of the spine of the scapula.

ACTION: Draws the scapula posterior and downward.

TEST:

Patient: Supine. Flex humerus on shoulder 180 degrees, abduct 45 degrees and slightly externally rotate arm.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact:: Dorsum of forearm to extend and adduct arm through oblique plane.

NEUROVASCULAR: (Sup) Cranium, superior aspect, sagittal suture 1" in front of posterior fontanelle.

NEUROLYMPHATIC: (Post/L) 7th ICS, mid-axillary area.

VISCERAL ORGAN:

I. *Bladder:* (Ant/BL) Rectus Abdominis, first section, lateral border near origin.

II. *Kidney:* (Ant/BL) Rectus Abdominis, second section, 1/2" lateral to linea alba.

M. A. P. : Tw9.75

V.L. : C7R

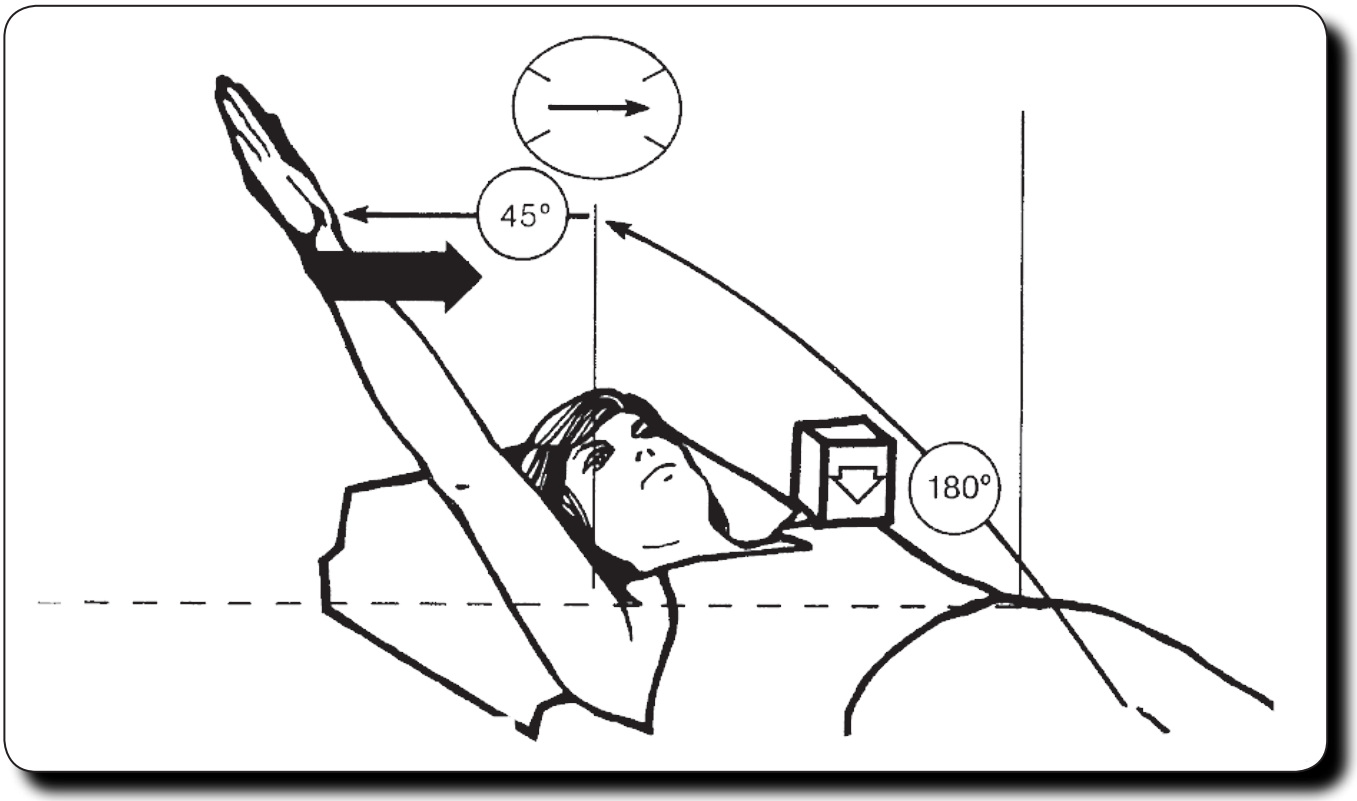
L. B. V.L. : T11R

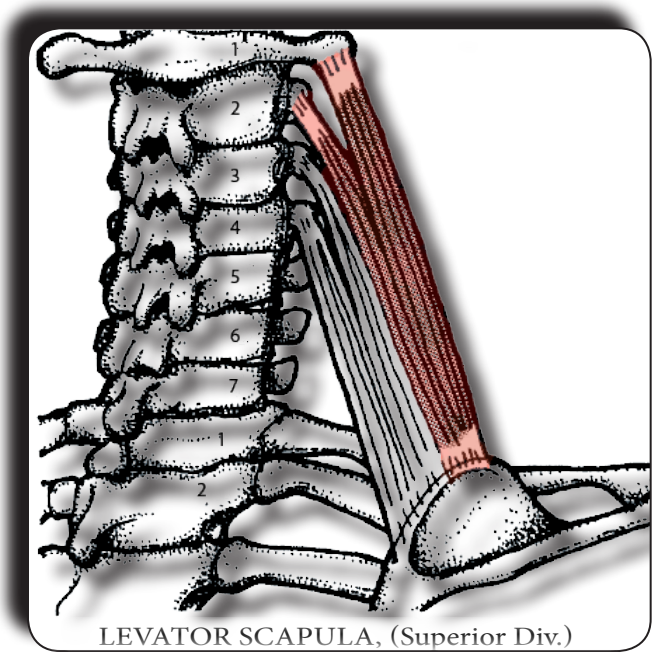
M. M. : C4

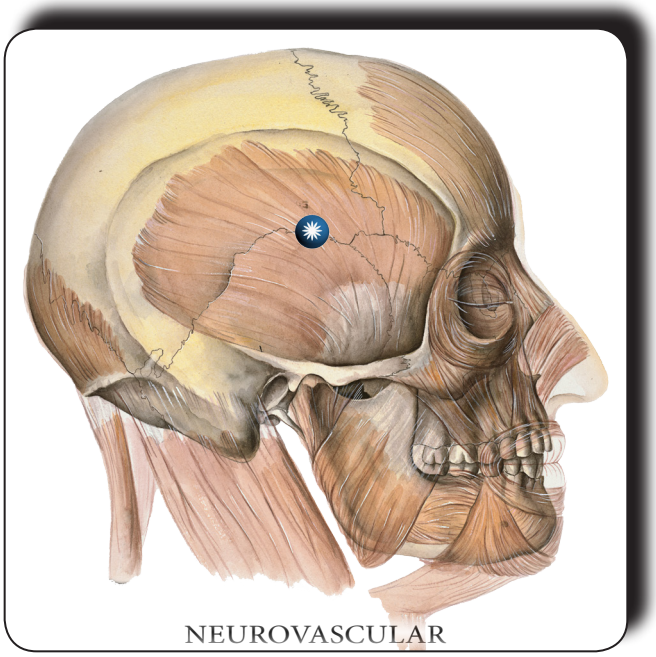
CRANIAL: Parietal

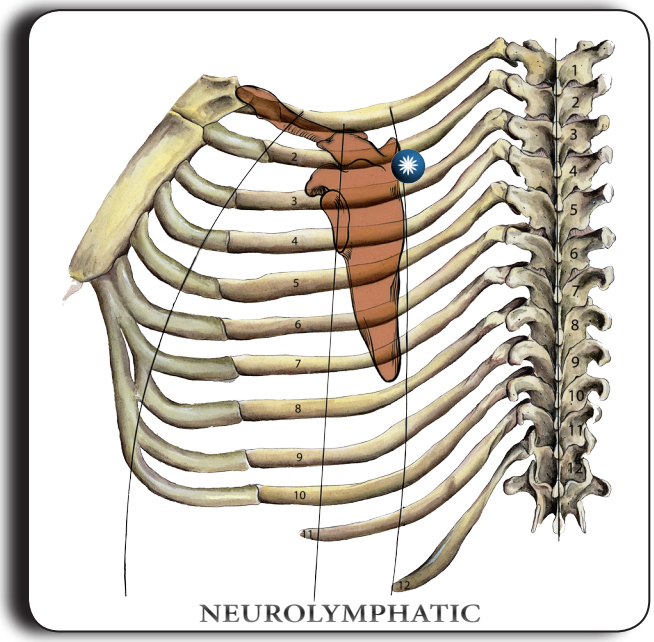
FOOT: Talus

NUTRIENT SOURCE:
1. Organic Iodine (S)

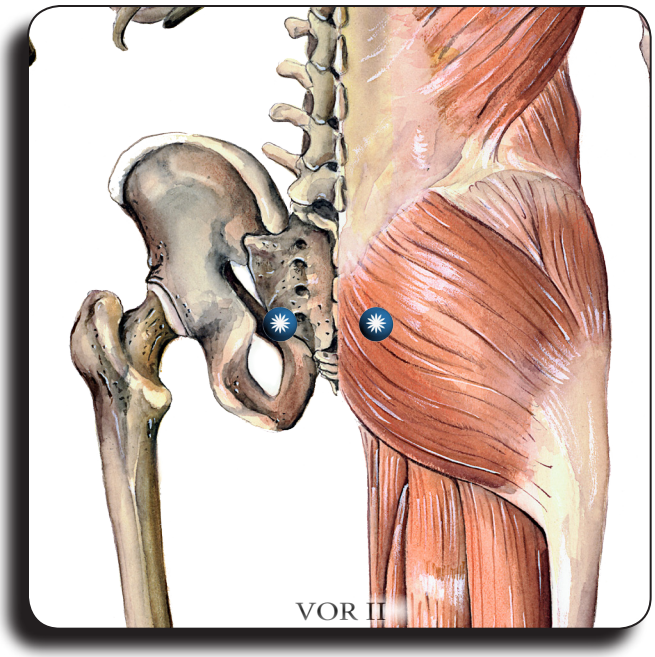


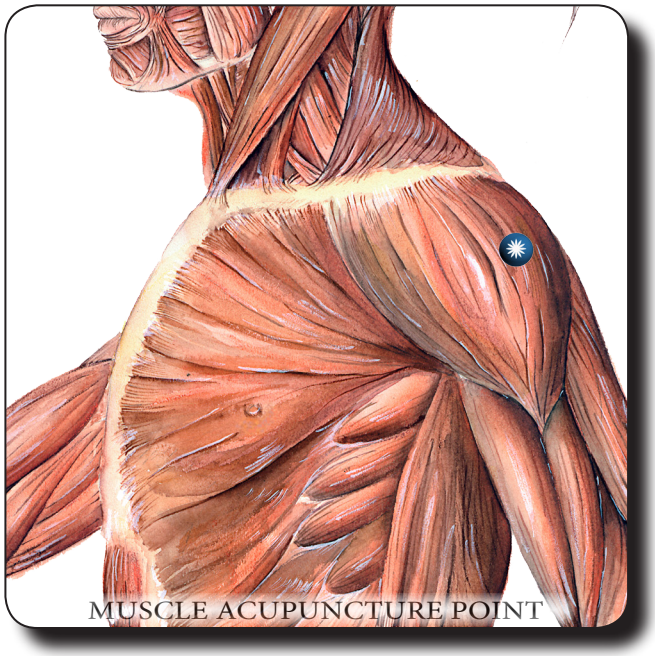

LEVATOR SCAPULA, (Superior Div.)


NEUROVASCULAR


NEUROLYMPHATIC

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 394: LEVATOR SCAPULA, (Superior Division)

ORIGIN: Transverse processes of atlas and axis vertebrae.

INSERTION: Vertebral border at superior angle of scapula.

ACTION: Raises the scapula, draws it medially and rotates it to lower the lateral angle.

TEST:

Patient: Supine. With elbow flexed, draw elbow inferiorly as far as possible and externally rotate arm 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal medial surface of humerus to abduct through a coronal plane.

NEUROVASCULAR: (Lat) Cranium, lateral aspect, squamosal suture, directly above ear.

NEUROLYMPHATIC: (Post/L) 2nd ICS, at vertebral border of scapula.

VISCERAL ORGAN:

I. *Frontal sinus - Lymphatics:* (Ant/BL) Maxillary bone, just below center of eye, medial to St1.

II. *Spleen:* (Post/BL) Pelvis, posterior aspect, sacrum, lateral inferior angle, B30.

M. A. P. : Li14.7

V.L. : L3 L

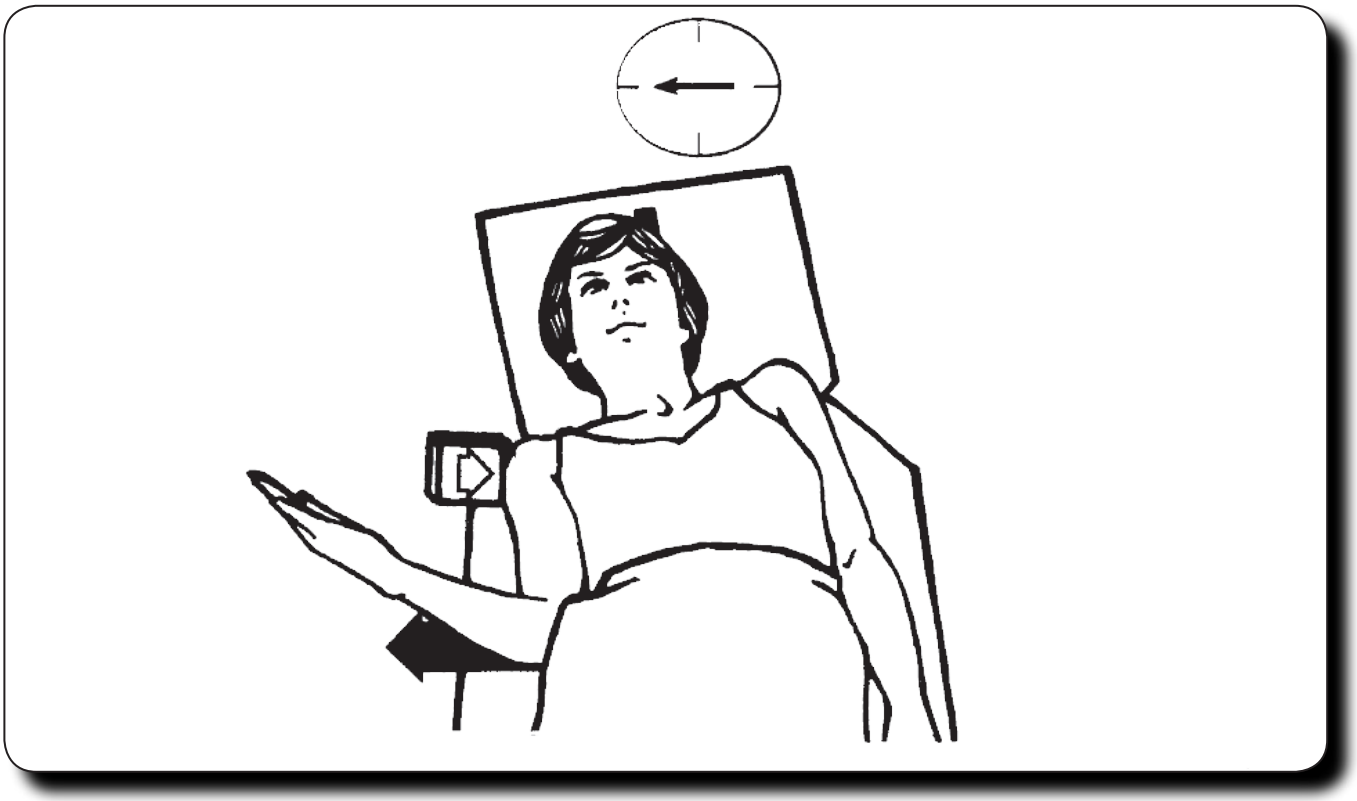
L. B. V.L. : C3L

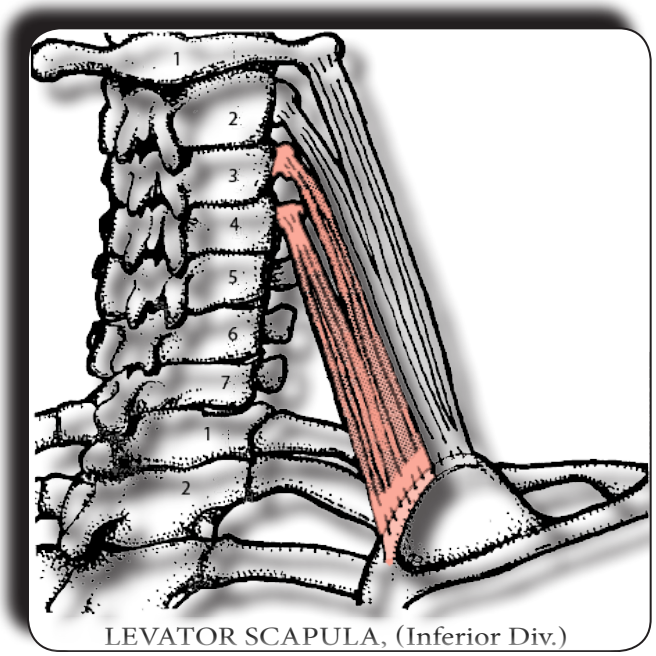
M. M. : C4

CRANIAL: In Research

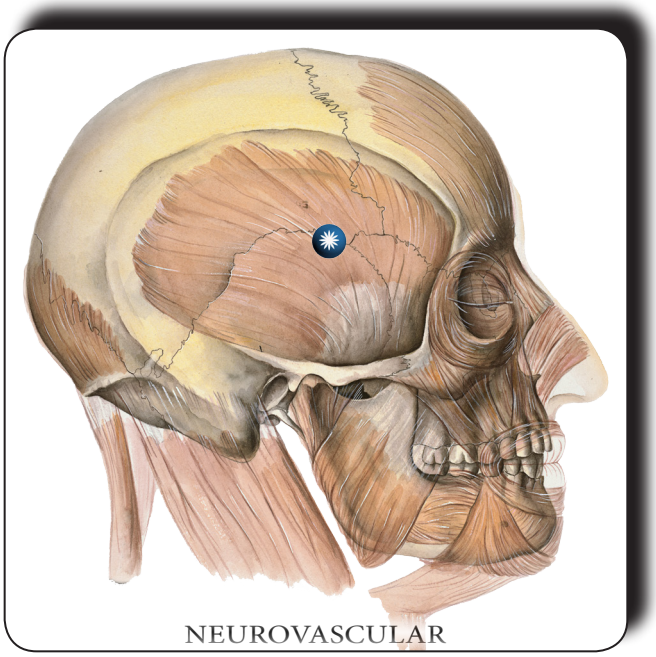
FOOT: In Research

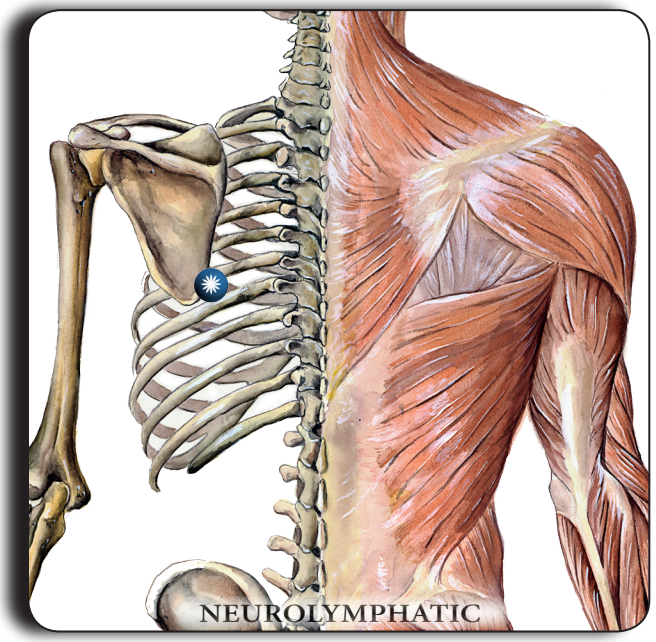
NUTRIENT SOURCE:

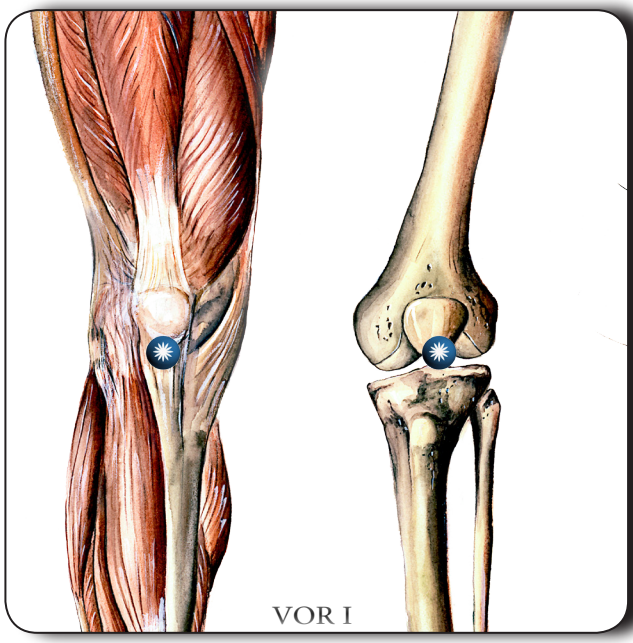


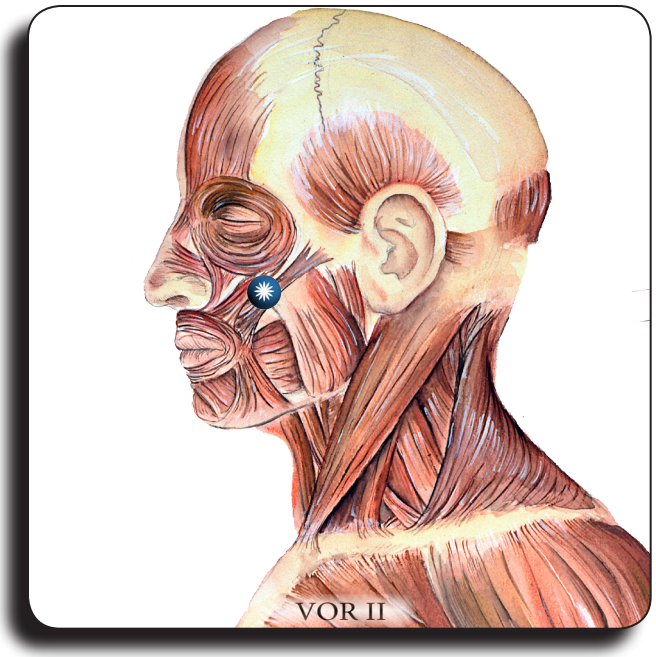


LEVATOR SCAPULA, (Inferior Div.)


NEUROVASCULAR


NEUROLYMPHATIC


VOR I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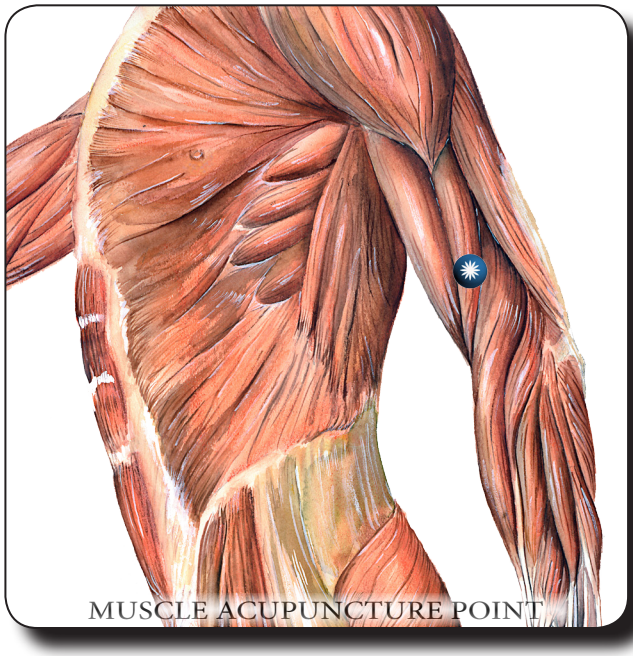

MUSCLE ACUPUNCTURE POINT

Muscle 396: LEVATOR SCAPULA, (Inferior Division)

ORIGIN: Posterior tubercles of transverse process of the 3rd and 4th cervical vertebrae.

INSERTION: Vertebral border, superior to the root of the spine of the scapula.

ACTION: Raises the scapula, draws it medially and rotates it to lower the lateral angle.

TEST:

Patient: Supine. With elbow flexed 90 degrees, draw elbow inferiorly as far as possible and adduct arm.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal medial surface of humerus to abduct through a coronal plane.

NEUROVASCULAR: (Lat) Cranium, lateral aspect, squamosal suture 3" above ear.

NEUROLYMPHATIC: (Post/L) 7th ICS, at the vertebral border of scapula.

VISCERAL ORGAN:

I. *Parathyroid:* (Ant/BL) Knee, superior anterior aspect, Patella tendon, insertion on tibia.

II. *Parotid Gland:* (Lat/BL) Zygomatic bone, anterior and inferior aspect, Si18.

M. A. P. : Li13.5

V.L. : L2R

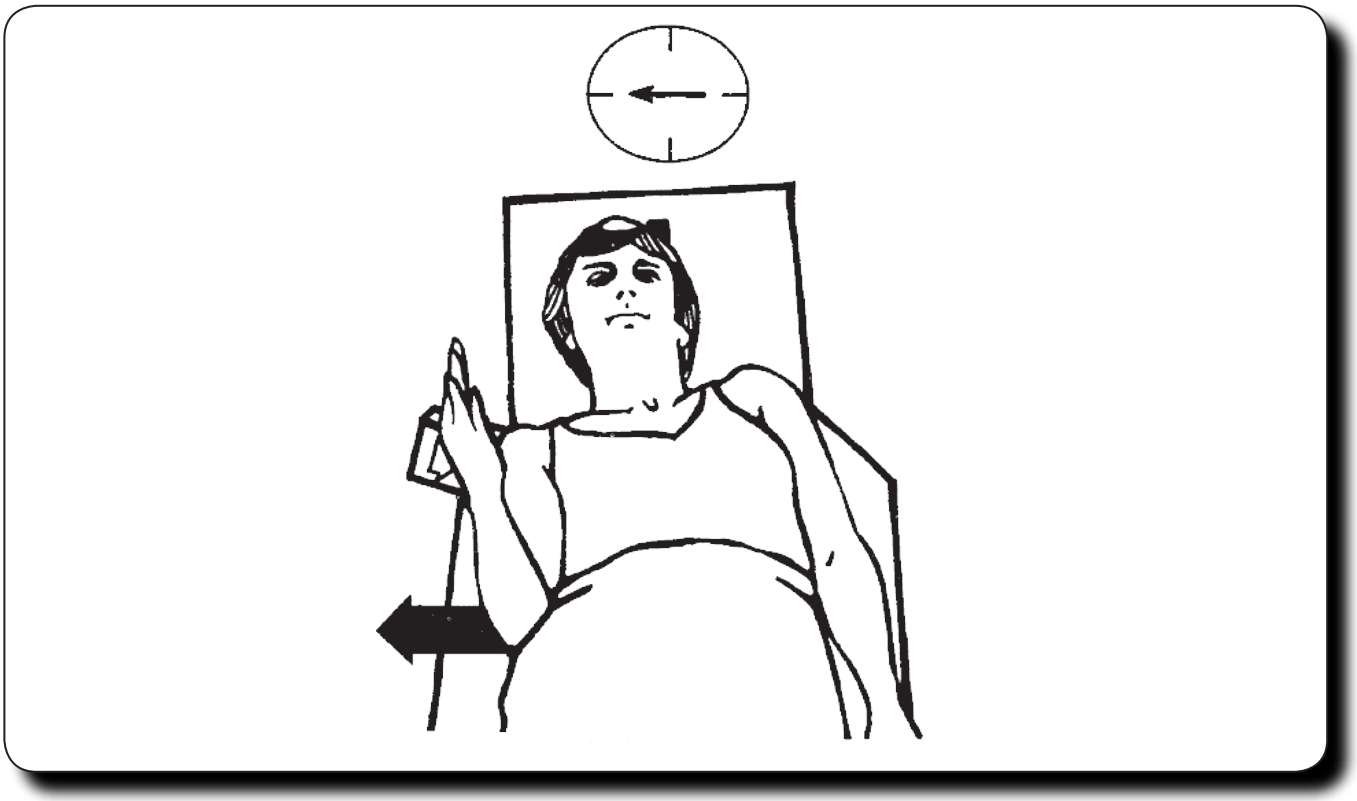
L. B. V.L. : C4R

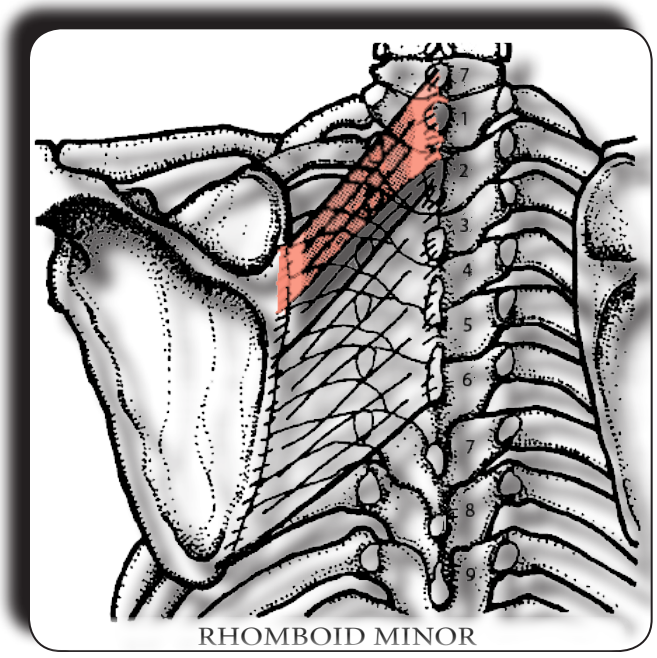
M. M. : C4

CRANIAL: Temporal

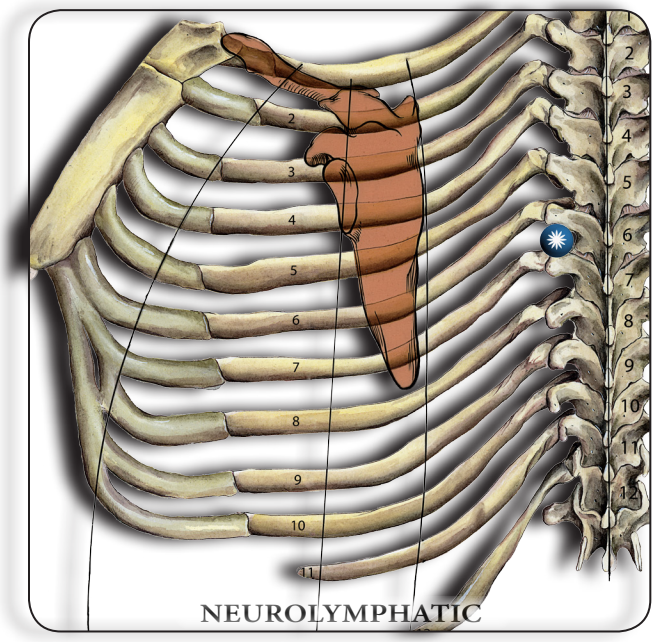
FOOT: Cuboid

NUTRIENT SOURCE:
1. Phosfood (S)

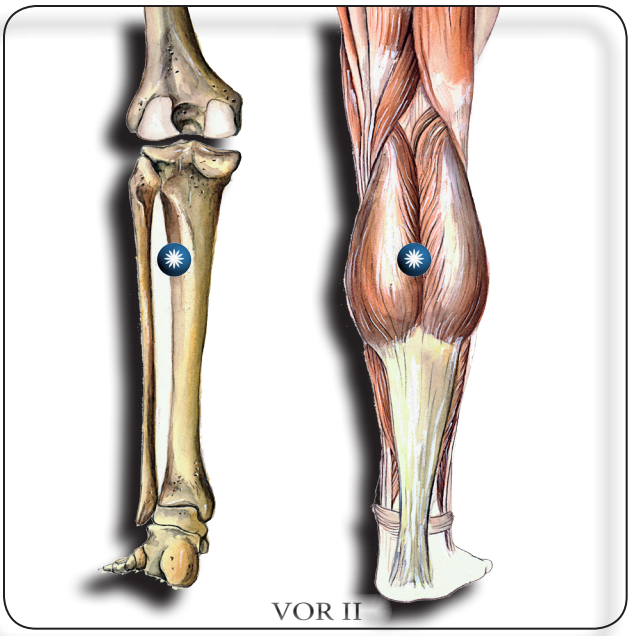


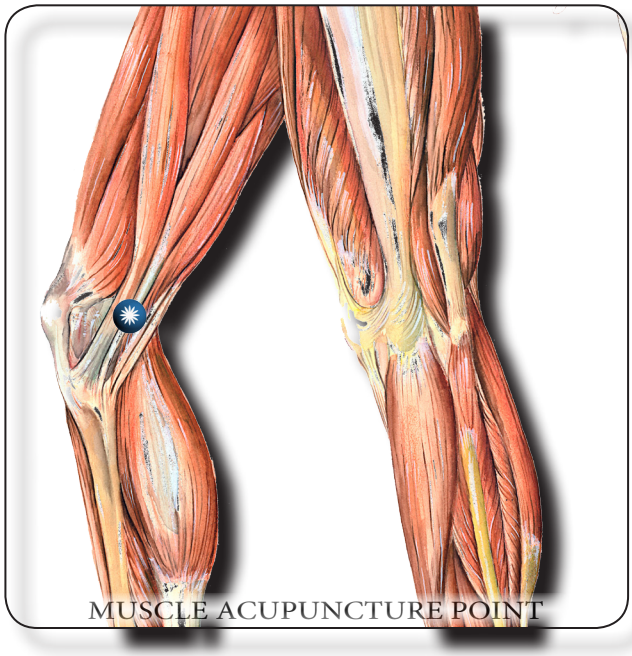

RHOMBOID MINOR

NEUROVASCULAR


NEUROLYMPHATIC

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 398: RHOMBOID MINOR

ORIGIN: Lower part of ligamentum nuchae, spinous process of 7th cervical and 1st thoracic vertebrae.

INSERTION: Into base of triangular smooth surface at the root of spine of scapula.

ACTION: Adducts the scapula.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Abduct and externally rotate arm on shoulder 23 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Medial distal aspect of humerus to abduct through coronal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, 1" superior to glabella, 1/2" lateral to midline.

NEUROLYMPHATIC: (Post/L) 6th ICS, at spine.

VISCERAL ORGAN:

I. *Posterior Pituitary:* (Ant/BL) Frontal Bone, 1/4' lateral to midline, halfway between hairline and glabella.

II. *Liver:* (Post/BL) Midline, calf, posterior aspect, B55.7

M. A. P. : Lv8

V.L. : T7R

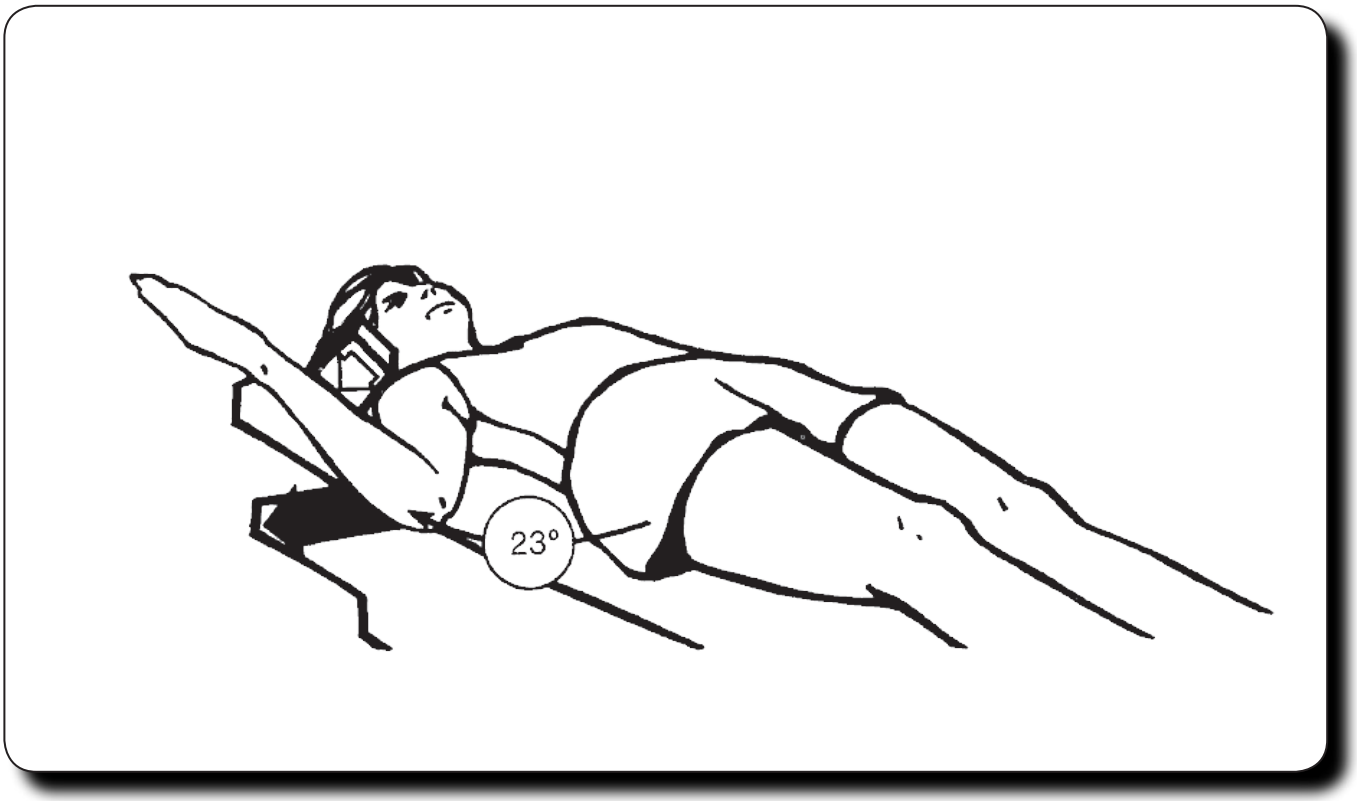
L. B. V.L. : T4R

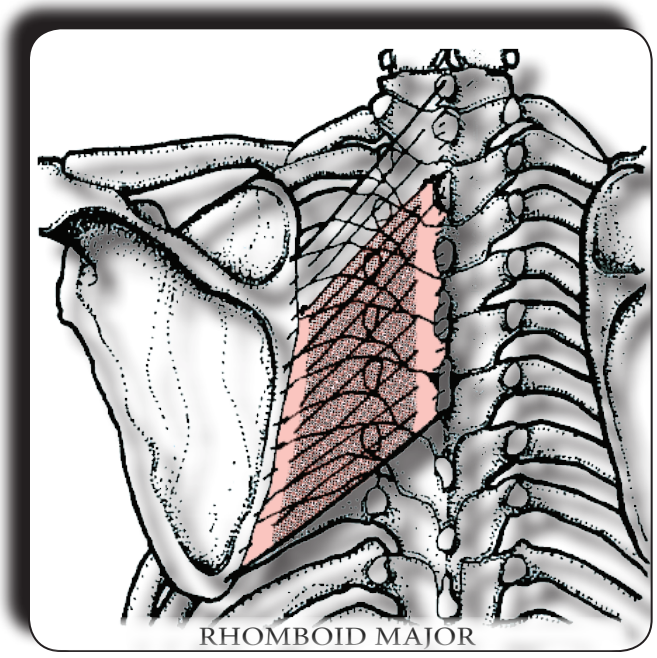
M. M. : C5

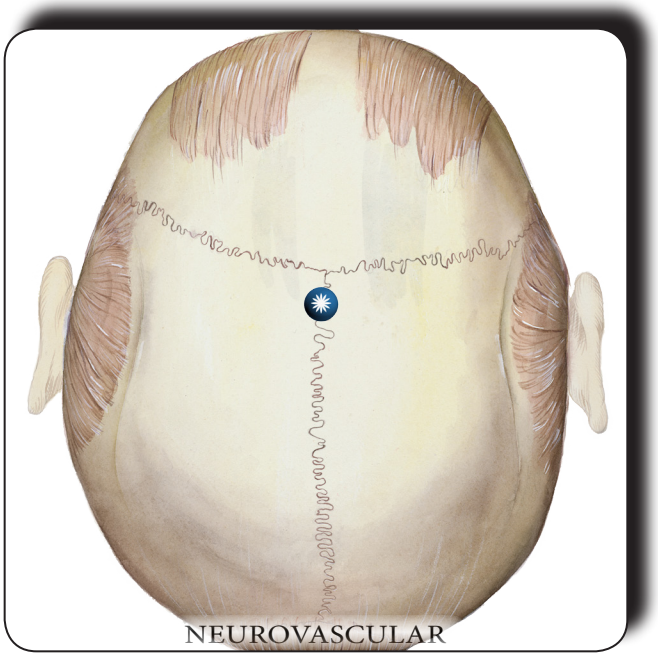
CRANIAL: In Research

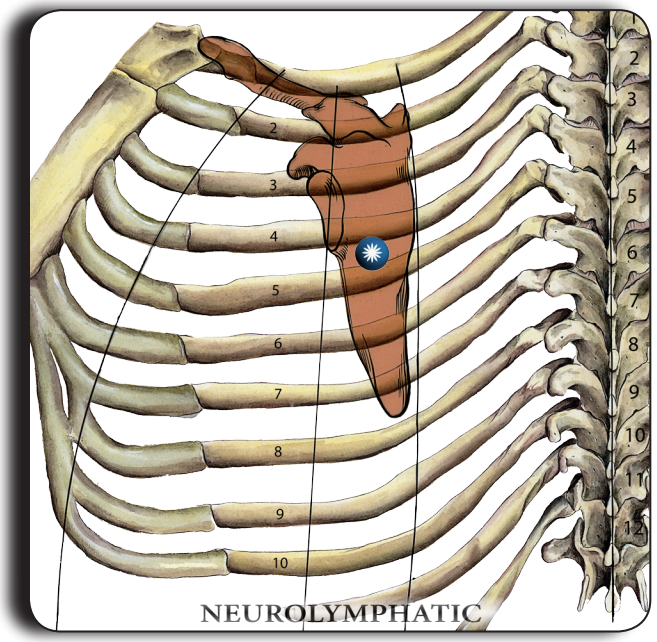
FOOT: In Research

NUTRIENT SOURCE:

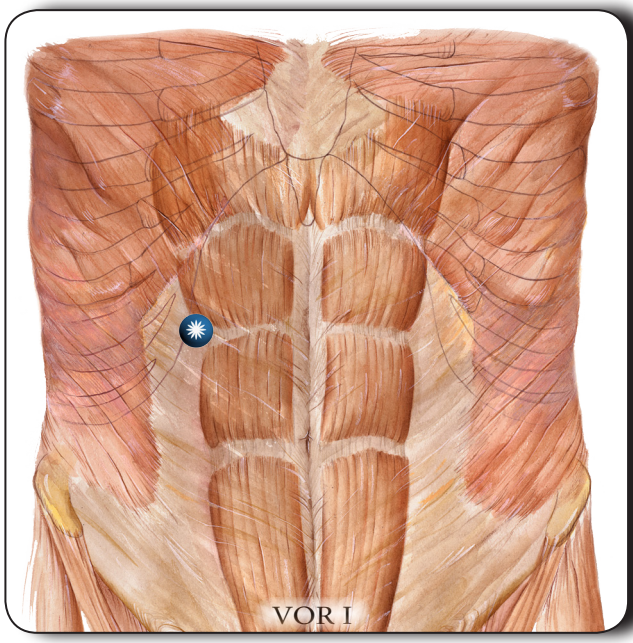


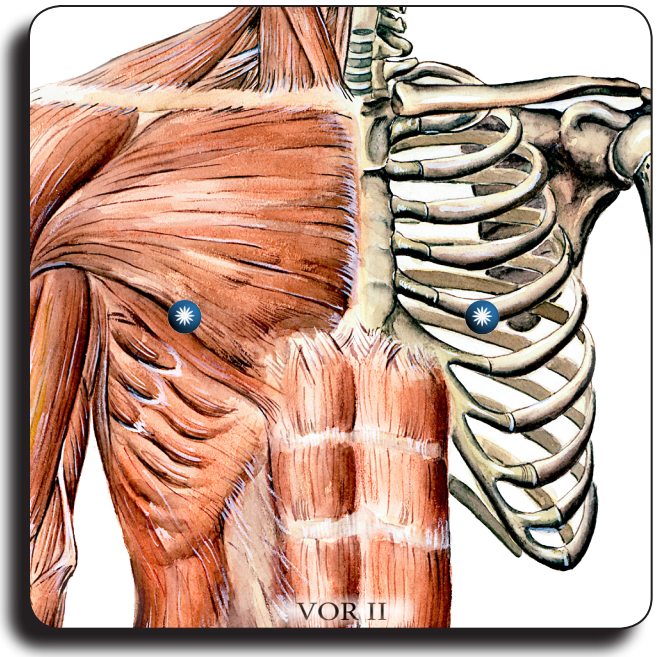

RHOMBOID MAJOR

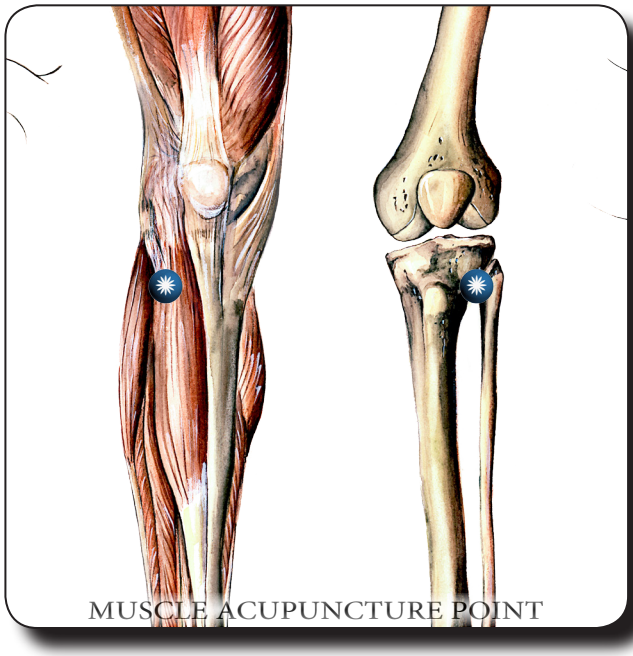

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 400: RHOMBOID MAJOR

ORIGIN: Spinous process of 2nd, 3rd, 4th and 5th thoracic vertebrae.

INSERTION: Vertebral border at the root of the spine of the scapula to its inferior angle.

ACTION: Adducts the scapula, drawing it medially toward the spine.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Abduct arm on shoulder 23 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Medial distal aspect of humerus to abduct through coronal plane.

NEUROVASCULAR: (Sup) Cranium, superior aspect, midline, sagittal suture just behind anterior fontanelle.
NEUROLYMPHATIC: (Post/L) 4th ICS, mid-axillary area.

VISCERAL ORGAN:

I. *Liver:* (Ant/R) Rectus Abdominis, junction of 3rd and 4th section, lateral aspect.

II. *Mammary Tissue:* (Ant/BL) Ribcage, inferior medial aspect of nipple.

M. A. P. : St36

V.L. : T8L

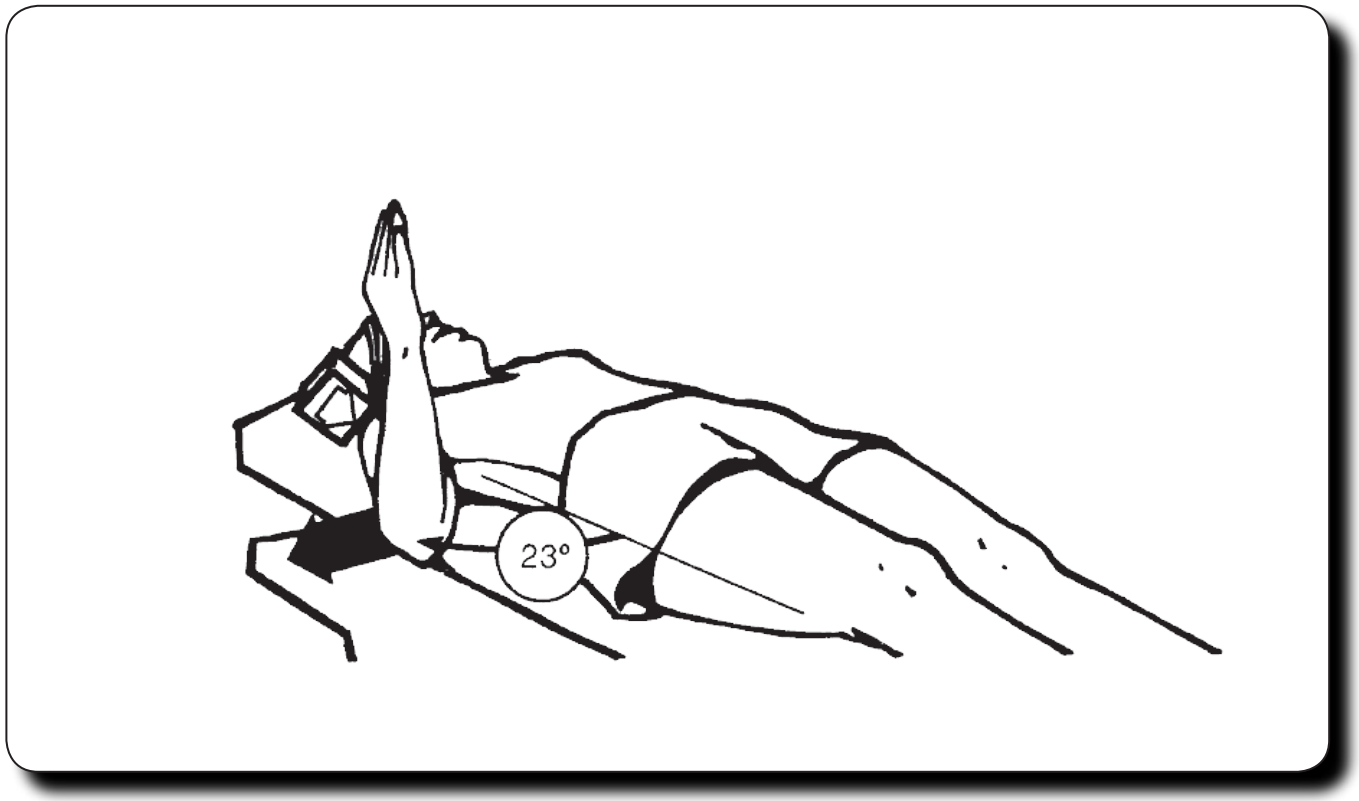
L. B. V.L. : T3L

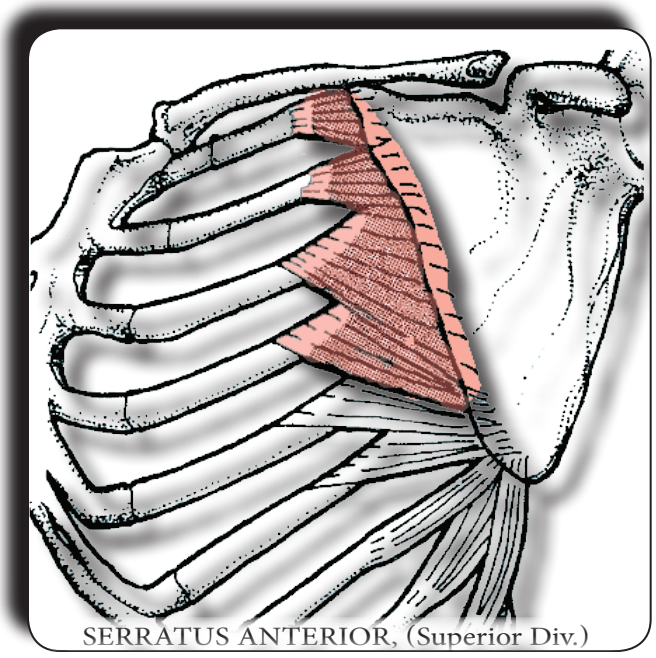
M. M. : C5

CRANIAL: Vomer

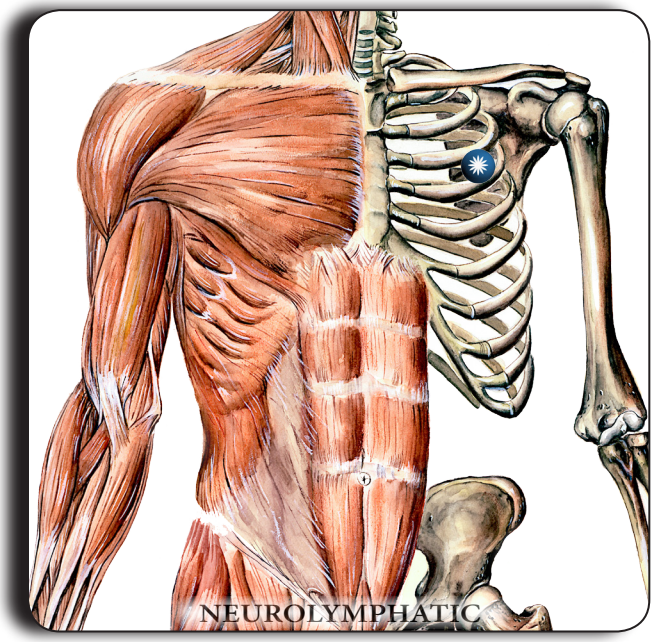
FOOT: 2nd Metatarsal

NUTRIENT SOURCE:
1. Kali Sulph 6X (Homeopathic) (HP)




SERRATUS ANTERIOR, (Superior Div.)

NEUROVASCULAR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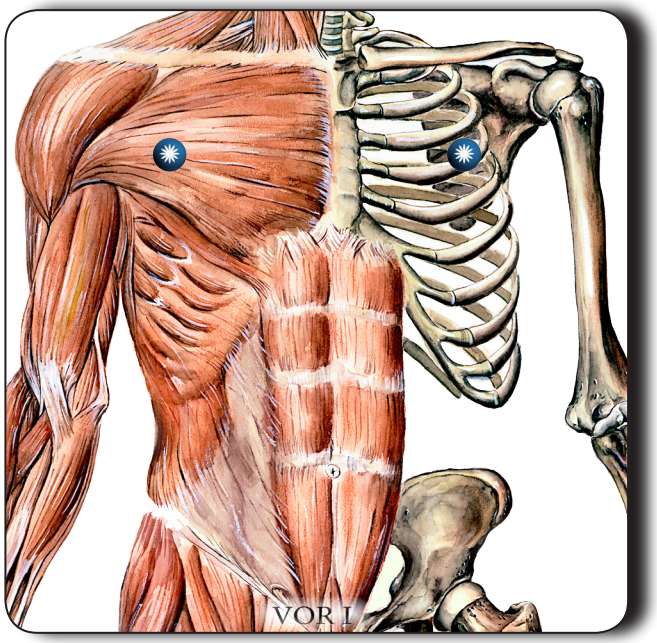
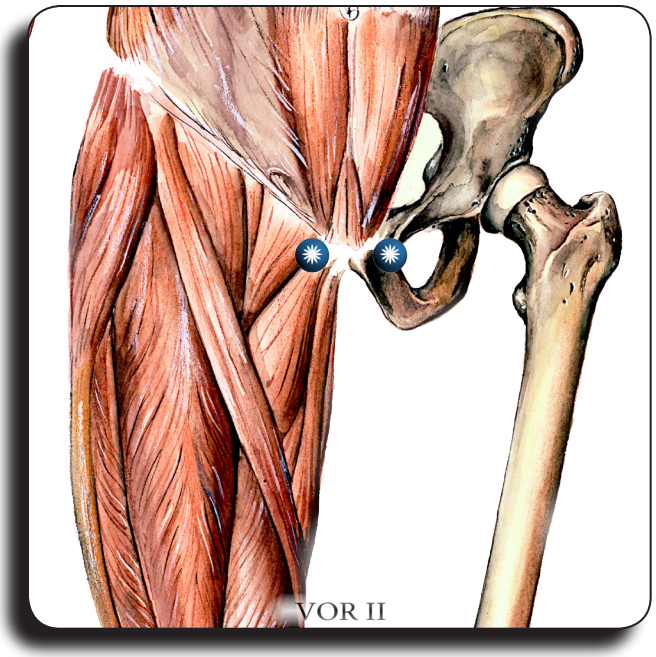
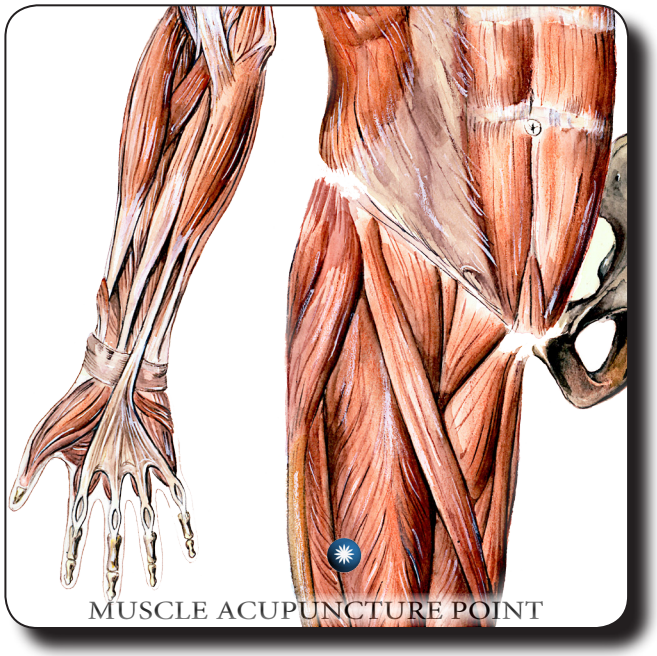

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 402: SERRATUS ANTERIOR, (Superior Division)

ORIGIN: Outer superior surface of the upper 4 ribs.

INSERTION: Into triangular area on internal surface of medial angle of scapula.

ACTION: Rotates the scapula, raising the point of the shoulder as in full flexion and abduction of the arm.

TEST:

Patient: Supine. Flex arm on shoulder 90 degrees and abduct 45 degrees. Arm in neutral position.

Doctor: Position: Ipsilateral.
. Brace: Contralateral shoulder.
Contact: Superior surface of forearm to extend through oblique plane.

NEUROVASCULAR: (Ant/BL) Cranium, anterior aspect, zygomatic frontal suture, just lateral to eye.

NEUROLYMPHATIC: (Ant/L) 3rd ICS just beyond nipple.

VISCERAL ORGAN:

I. *Lungs*: (Ant/BL) 3rd ICS, superior to nipple.

II. *Gonads*: (Ant/BL) Pelvis, Pubic area, inferior ramus of Pubes.

M. A. P. : St32.75

V.L. : C5L

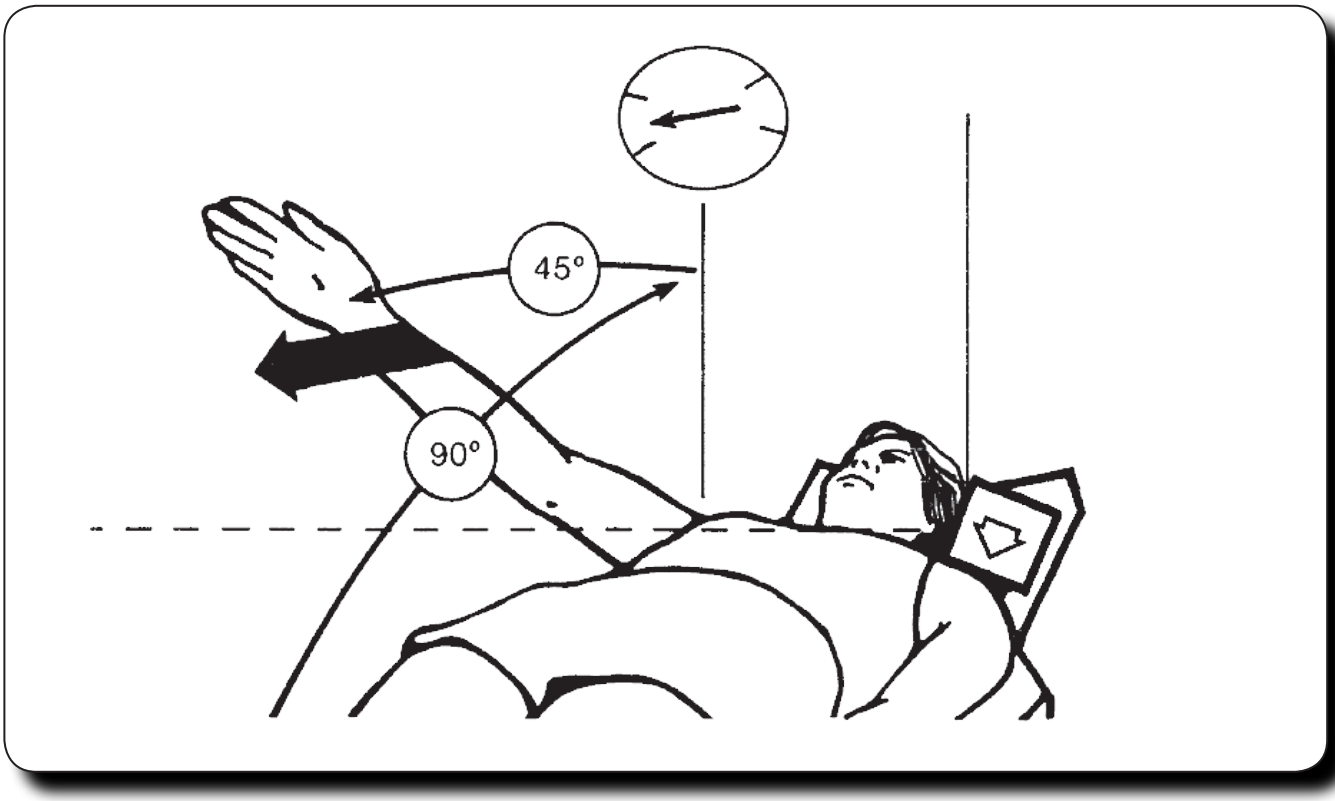
L. B. V.L. : L1L

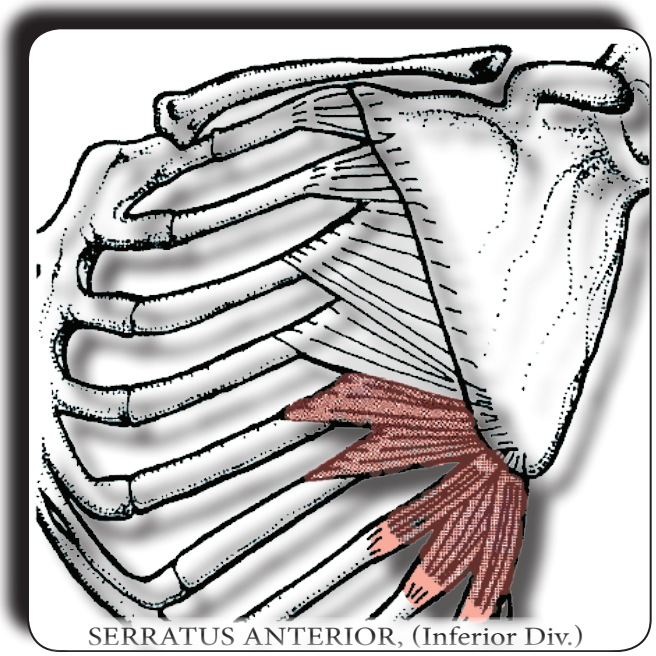
M. M. : C5

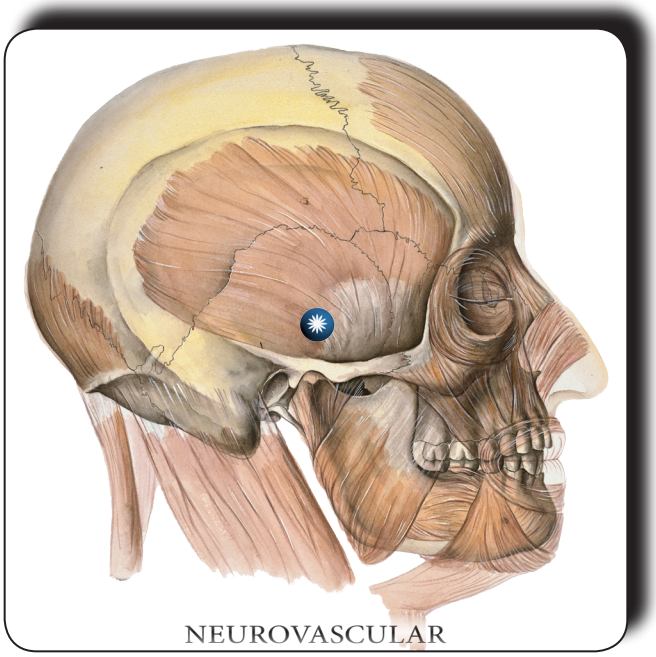
CRANIAL: Parietal

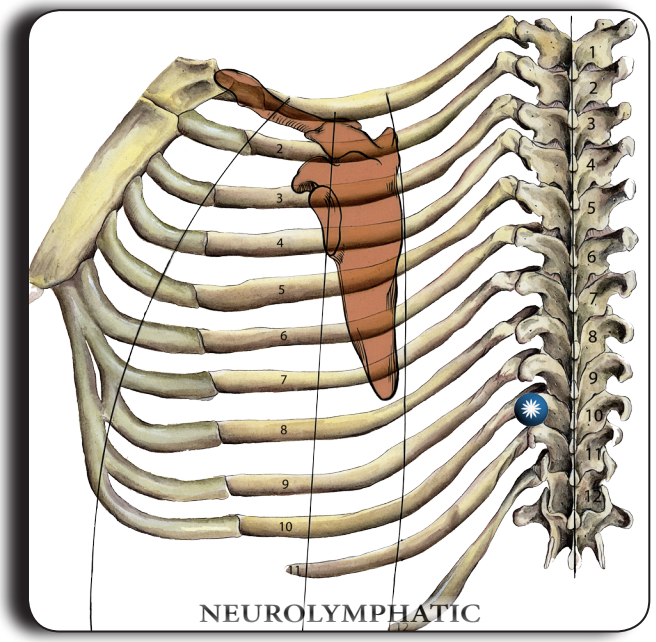
FOOT: Talus

NUTRIENT SOURCE:
1. Iodomere (S)

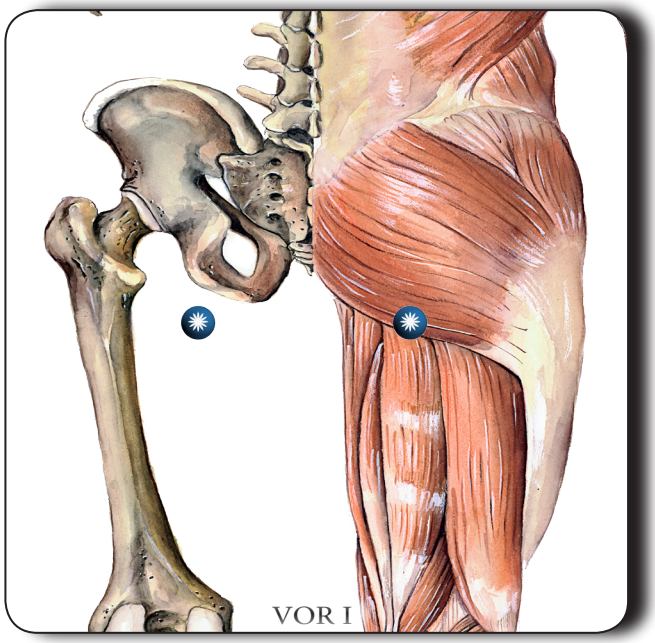


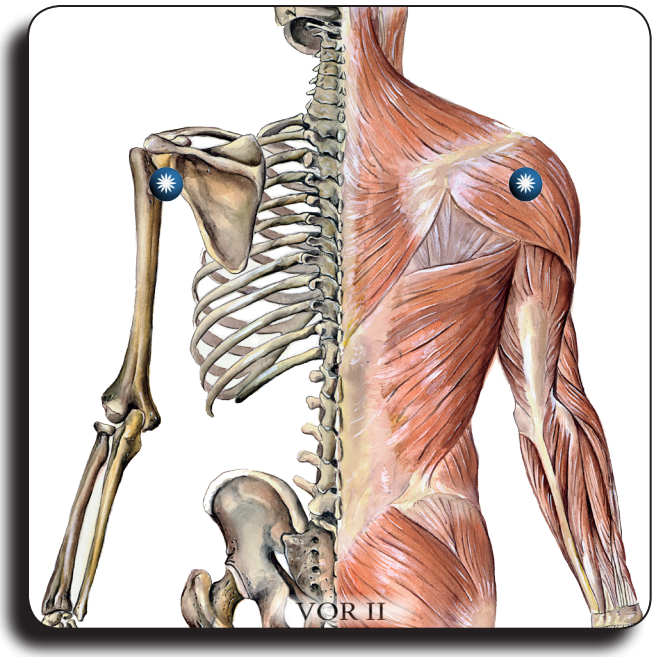

SERRATUS ANTERIOR, (Inferior Div.)

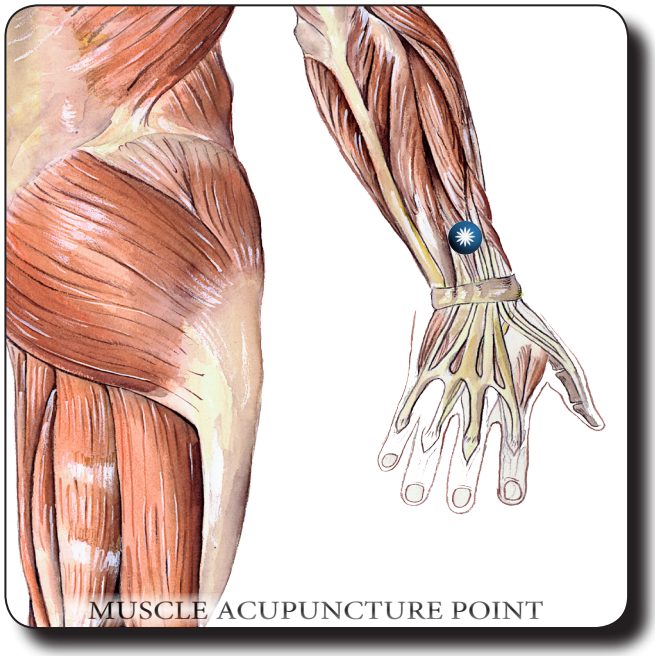

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 404: SERRATUS ANTERIOR, (Inferior Division)

ORIGIN: Fleshy digitation from outer surfaces and superior borders of 5th through 9th ribs.

INSERTION: Triangular impression, ventral surface of inferior angle of scapula.

ACTION: Draws the scapula downward.

TEST:

Patient: Supine. Flex humerus on shoulder 180 degrees. Palmar aspect of hand faces anterior.

Doctor: Position: Ipsilateral.
Brace: Contralateral.
Contact: Dorsum of forearm to extend arm through sagittal plane.

NEUROVASCULAR: (Lat) Temporal bone, squamosal section, directly above condyle of TMJ.

NEUROLYMPHATIC: (Post/L) 10th ICS, at spine.

VISCERAL ORGAN:

I. *Thymus:* (Post/BL) Pelvis, posterior aspect, belly of Gluteus maximus, Coccyx Division, 1" medial and 1" superior to B50.

II. *Lungs:* (Post/BL) Shoulder, posterior aspect, Si9.7, proximal posterior surface of humerus in belly of posterior Deltoid.

M. A. P. : Tw5.5

V.L. : T5L

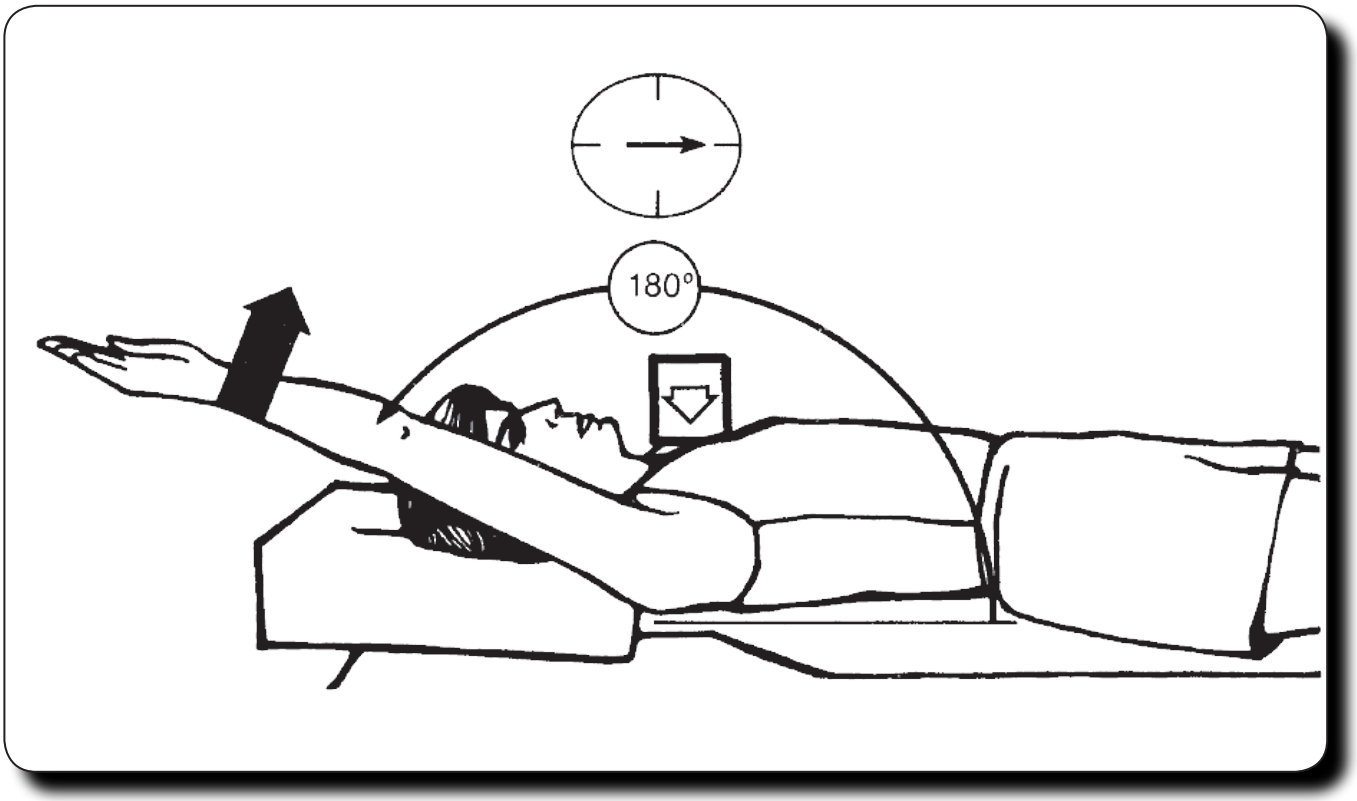
L. B. V.L. : T6L

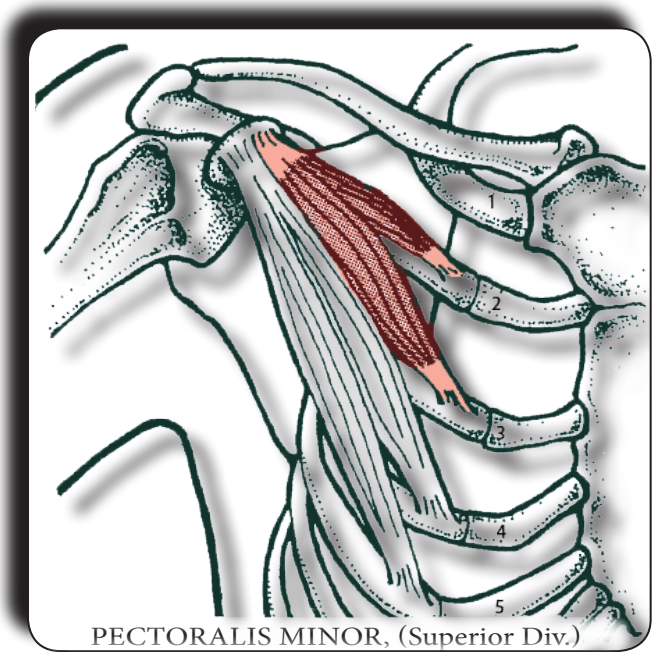
M. M. : C7

CRANIAL: Maxillary

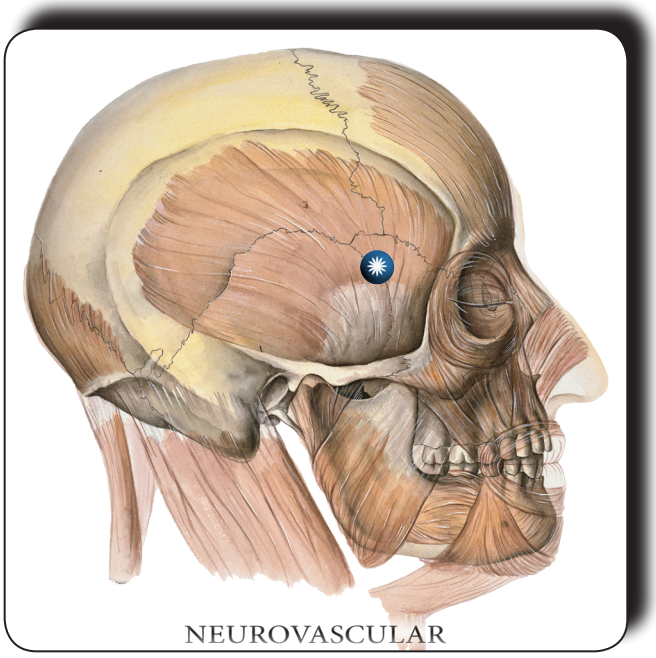
FOOT: 3rd metatarsal

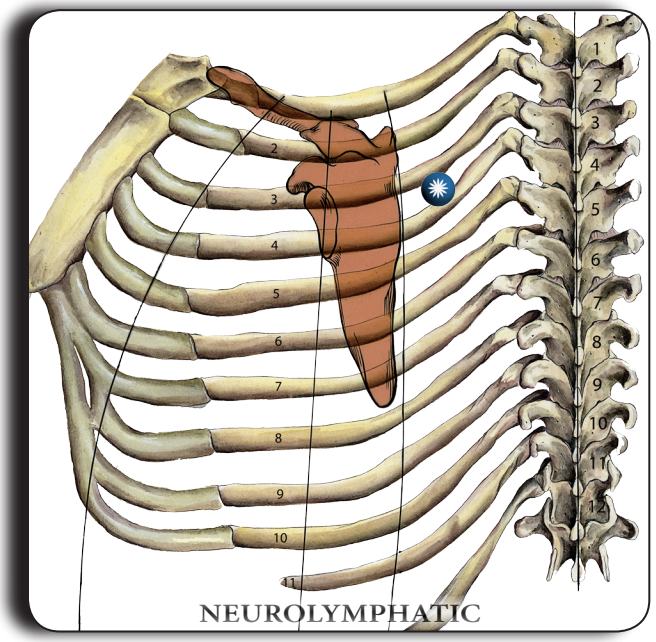
NUTRIENT SOURCE:
1. Vitamin B (S)



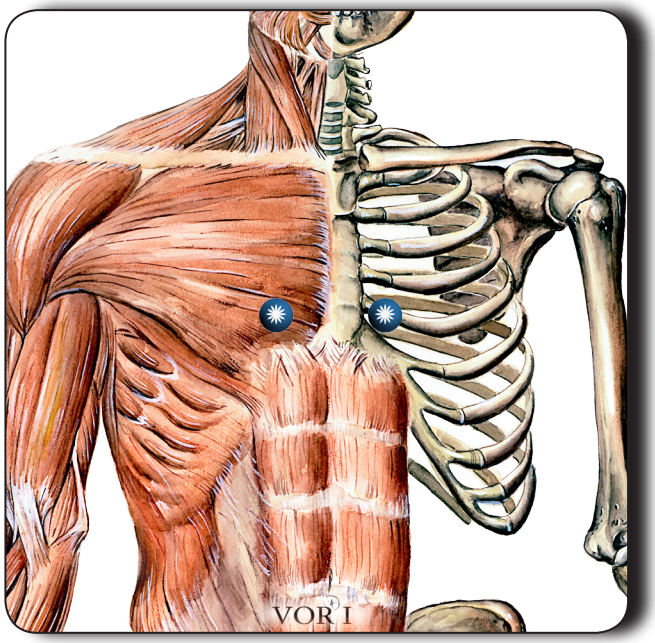


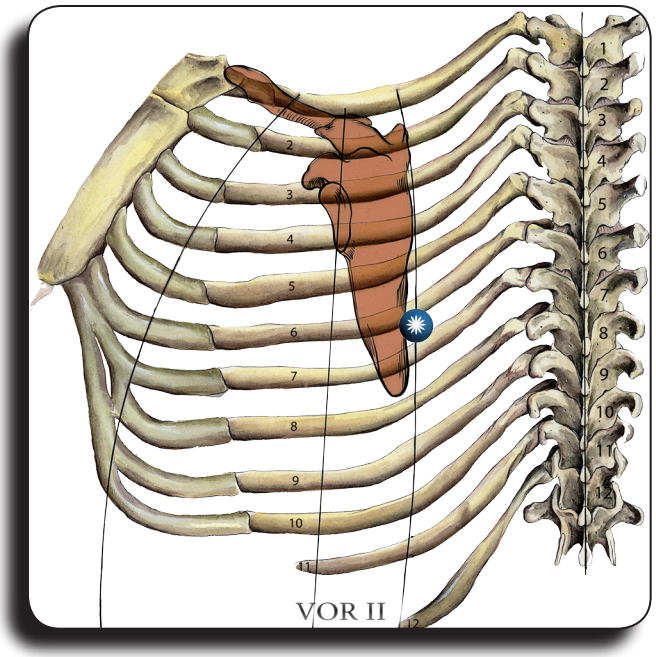
PECTORALIS MINOR, (Superior Div.)


NEUROVASCULAR



NEUROLYMPHATIC


VOR I



VOR II

MUSCLE ACUPUNCTURE POINT

Muscle 406: PECTORALIS MINOR, (Superior Division)

ORIGIN: Upper margins and outer surface of 2nd and 3rd ribs.

INSERTION: Medial upper surface of coracoid process of scapula.

ACTION: (Both Divisions) With ribs fixed, draws the scapula forward and around the chest while depressing the shoulder girdle. With scapula fixed, elevates the 2nd - 5th ribs especially in forced respiration.

TEST:

Patient: Supine. Flex arm on shoulder 90 degrees, completely externally rotate humerus. Keep elbow straight. Draw arm across chest 45 degrees toward opposite hip. Draw and depress shoulder girdle 20 degrees.

Doctor: Position: Ipsilateral.
Brace: Opposite shoulder.
Contact: Ipsilateral forearm to abduct arm and elevate scapula through an oblique plane.

NEUROVASCULAR: (Lat)Temporal bone, squamosal section at the level of the upper part of the orbit.

NEUROLYMPHATIC: (Post/L) 3rd ICS, 3" lateral to spine.

VISCERAL ORGAN:

I. *Lungs:* (Ant/BL) Ribcage, 5th rib near sternum.

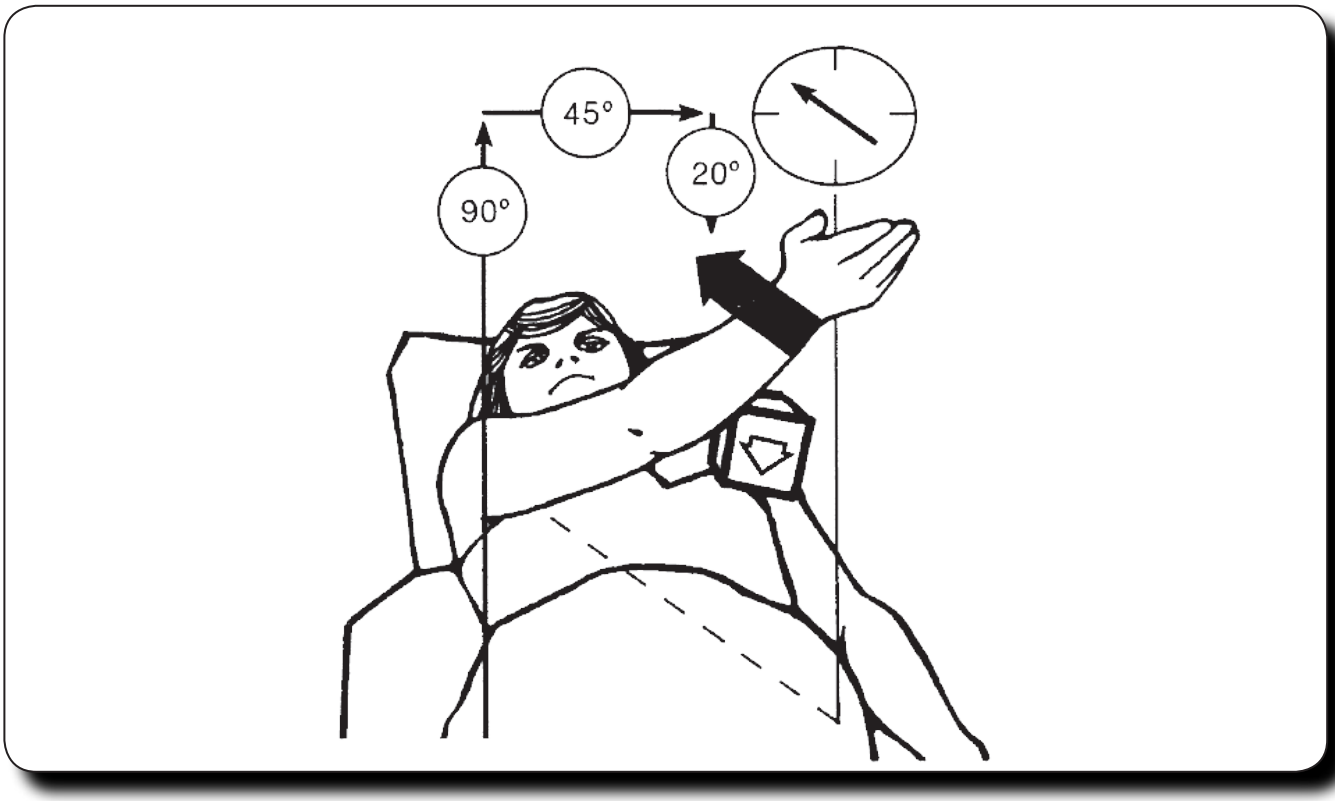
II. *Heart:* (Post/L) Ribcage, posterior aspect, 6th ICS, vertebral border of scapula, B40.

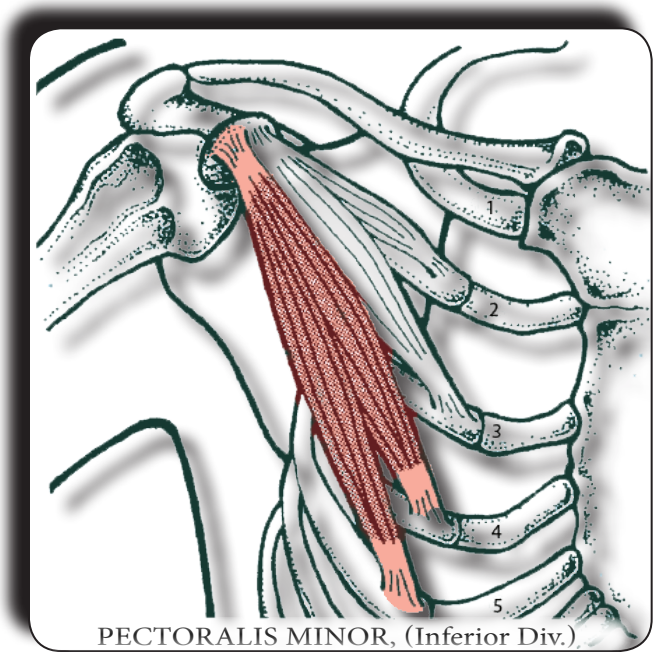
M. A. P. : G21
V.L. : L2R
L. B. V.L. : C4R
M. M. : T1

CRANIAL: Glabella

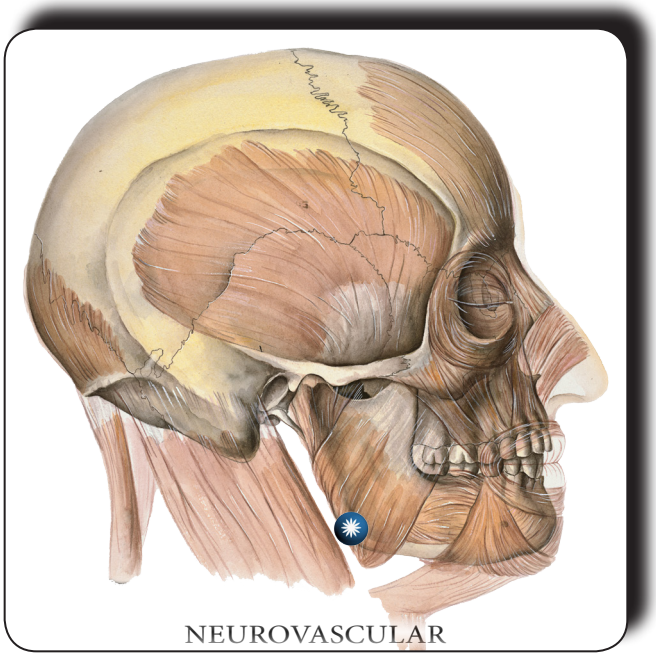
FOOT: 3rd Cuneiform

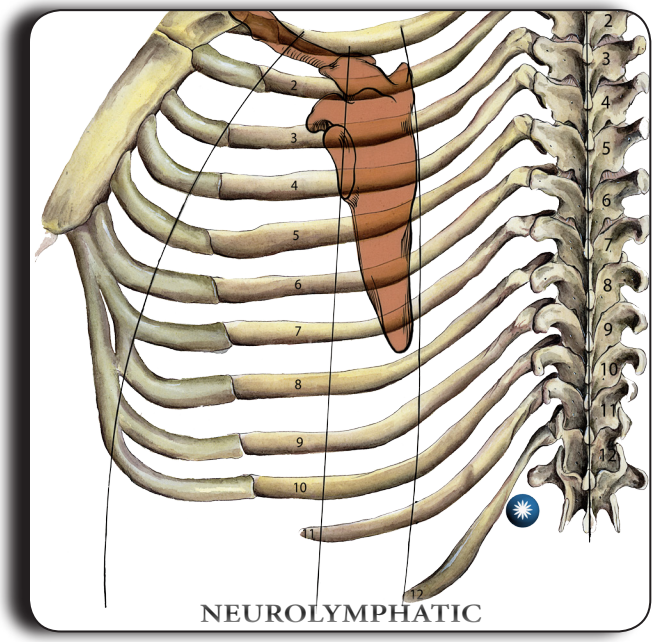
NUTRIENT SOURCE:
1. Vitamin B (S)



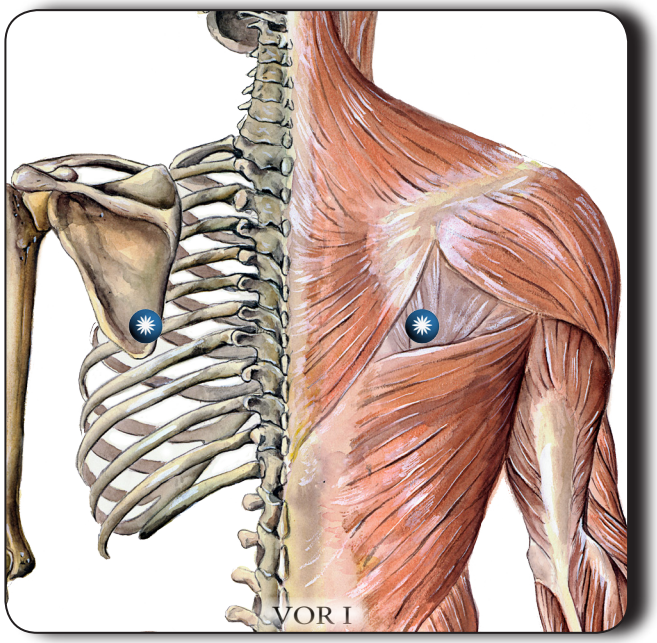


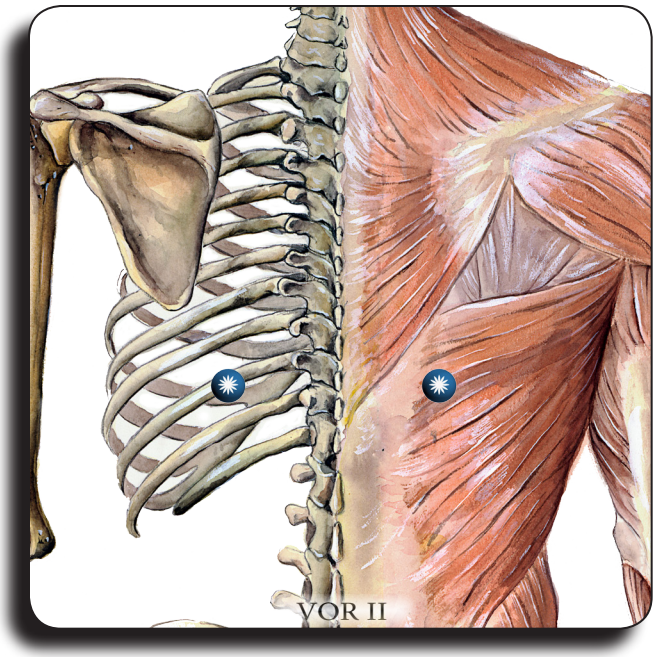
PECTORALIS MINOR, (Inferior Div.)

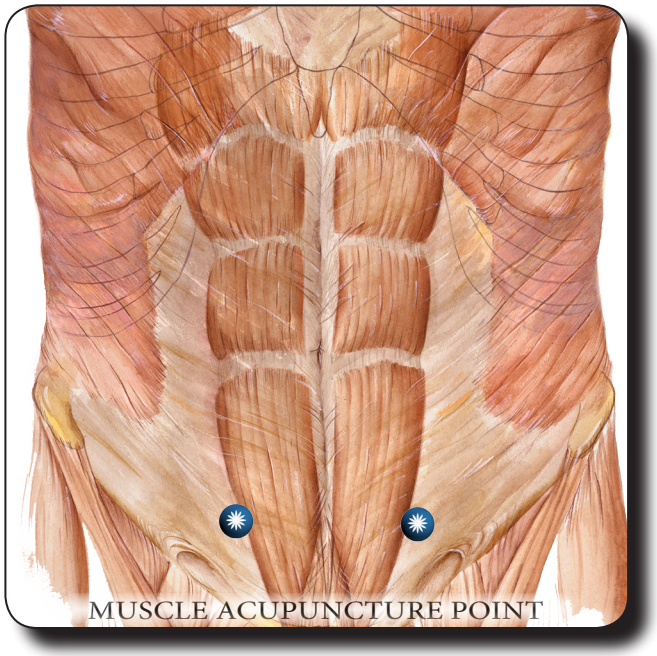

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 408: PECTORALIS MINOR, (Inferior Division)

ORIGIN: Upper margins and outer surface of the 4th and 5th ribs.

INSERTION: Medial upper surface of coronoid process of scapula.

ACTION: With ribs fixed, draws the scapula forward and around chest while depressing the shoulder girdle. With scapula fixed, elevates 2nd - 5th ribs, especially in forced respiration.

TEST:

Patient: Supine. Flex arm on shoulder 90 degrees, completely externally rotate humerus. Keep elbow straight. Draw arm across chest 23 degrees toward opposite knee and depress shoulder girdle 20 degrees.

Doctor: Position: Ipsilateral.
Brace: Opposite shoulder.
Contact: Ipsilateral forearm to abduct arm and elevate scapula through an oblique plane.

NEUROVASCULAR: (Lat) Mandible bone near angle.

NEUROLYMPHATIC: (Post/L) 12th ICS, 2" lateral to spine.

VISCERAL ORGAN:

I. *Kidneys*: (Post/BL) Scapula, inferior aspect, 1" lateral to vertebral border.

II. *Lungs*: (Post/BL) Rib cage, posterior aspect of 10th rib at B42.

M. A. P. : St28

V.L. : T5R

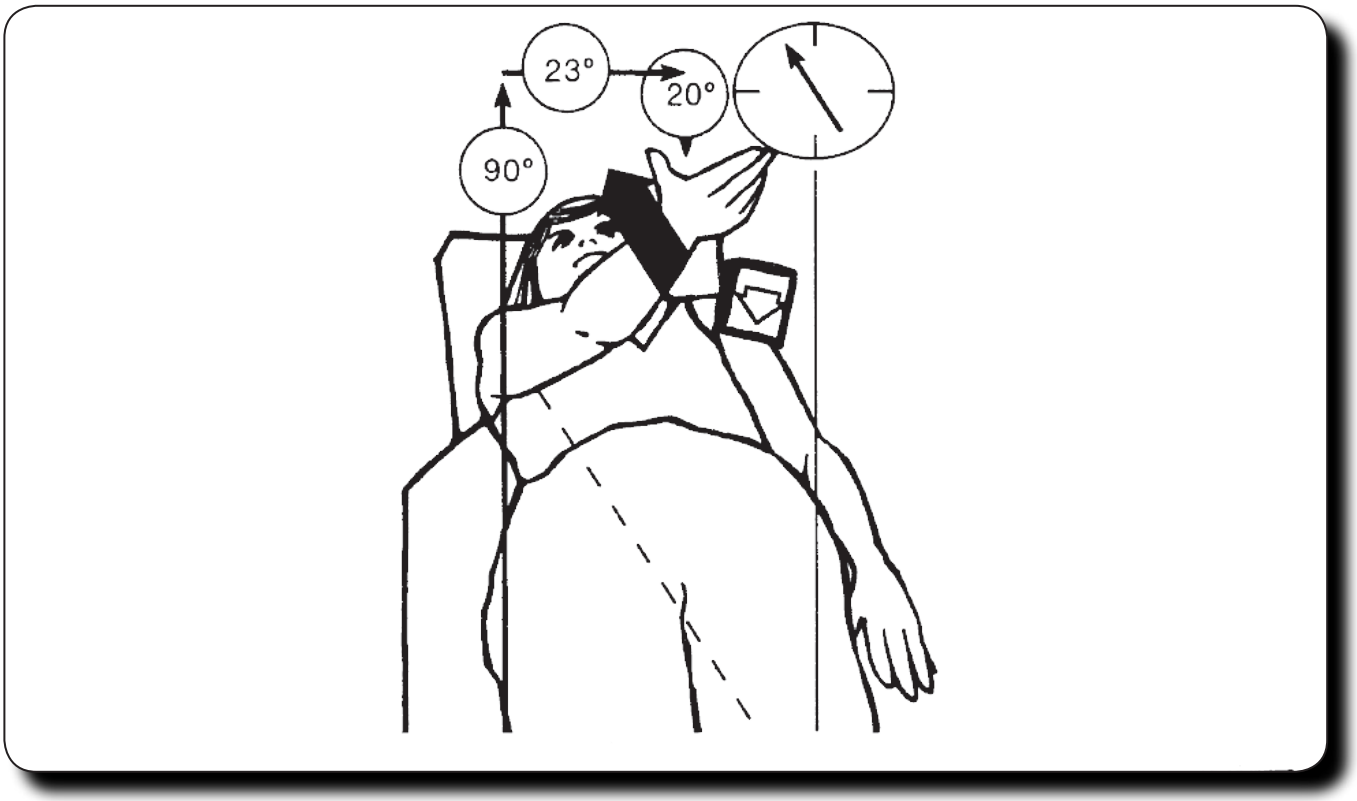
L. B. V.L. : T6R

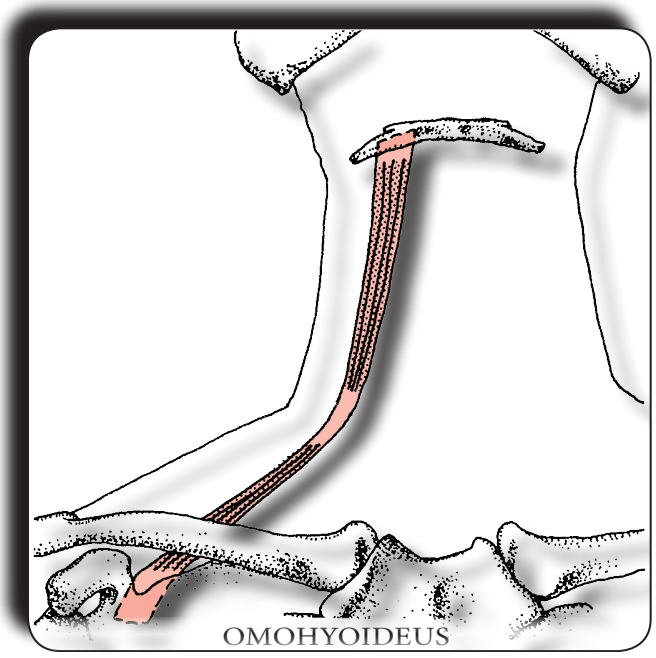
M. M. : T1

CRANIAL: In Research

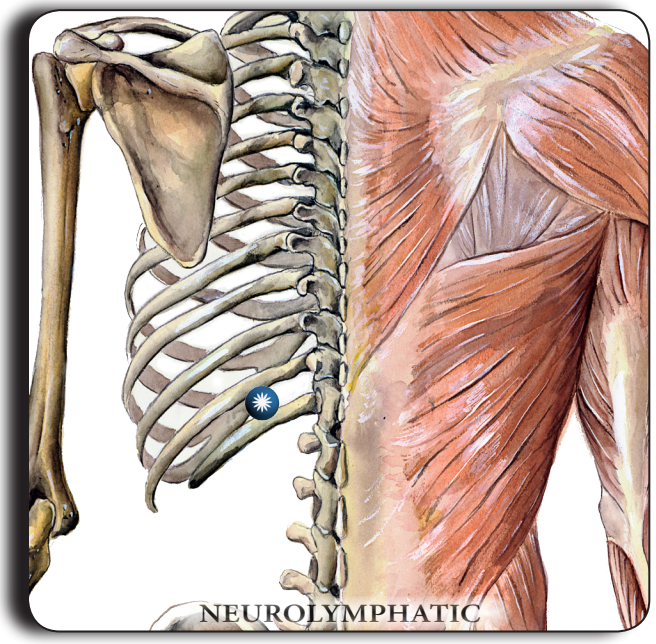
FOOT: In Research

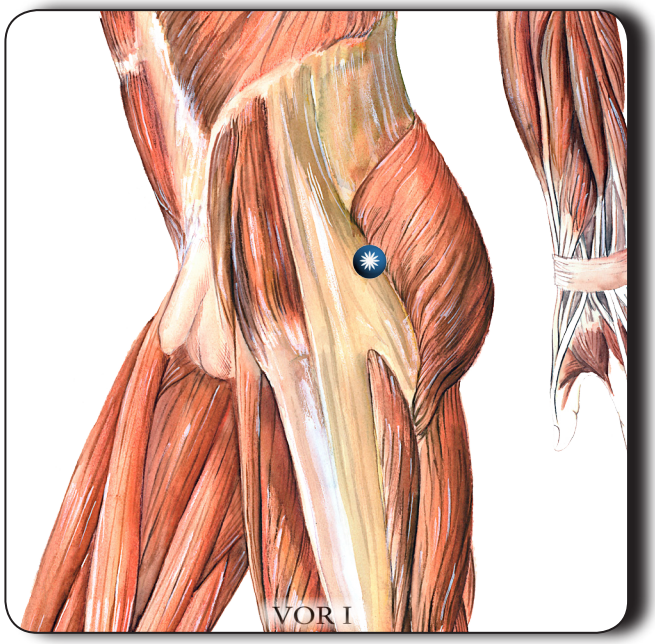
NUTRIENT SOURCE:
1. Wheat Germ (S)



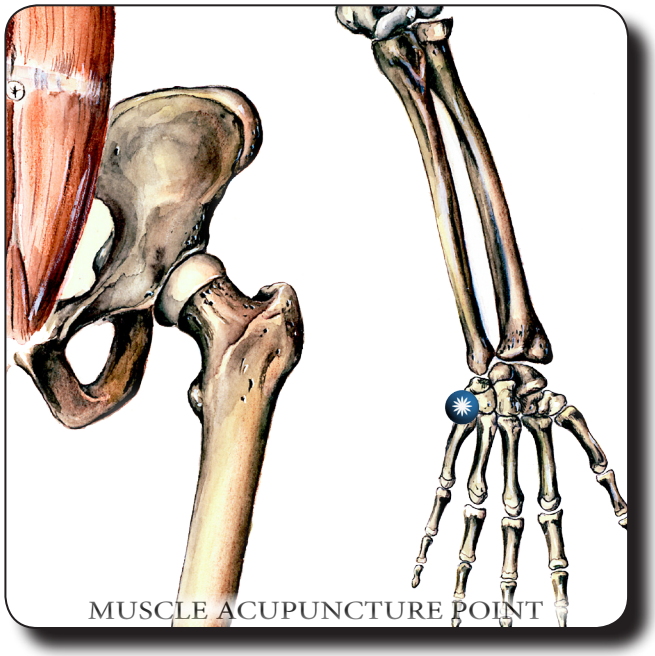

OMOHYOIDEUS

NEUROVASCULAR


NEUROLYMPHATIC


VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 306: OMOHYOIDEUS

ORIGIN: Upper border of scapula.

INSERTION: Lower border of hyoid.

ACTION: Draws shoulders forward and superior as far as possible.

TEST:

Muscle challenge: Draw shoulders forward and superior as far as possible.

TL Challenge: TL belly of muscle located posterior to SCM, superior to clavicle and anterior to Trapezius.

NEUROVASCULAR: (Ant/BL) Zygomatic bone, lateral inferior aspect, eye orbit.

NEUROLYMPHATIC: (Post/L) 11th ICS, 2" lateral to spine.

VISCERAL ORGAN:

I. *Spleen:* (Lat/BL) Pelvis, posterior lateral aspect, 2-3" superior to G30.

II. *Eye:* (Ant/BL) Frontal bone, superior to Glabella, B2.5.

M. A. P. : H6.5

V.L. : L3R

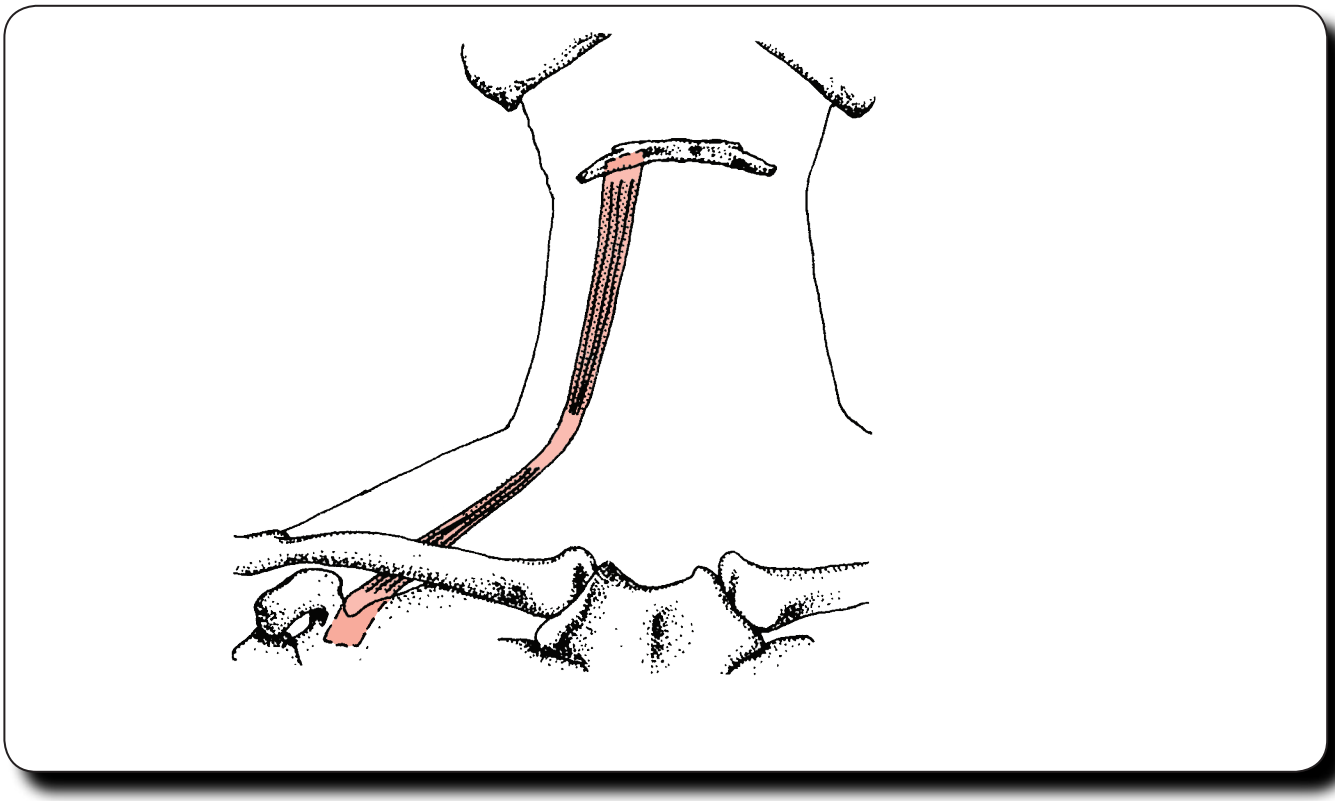
L. B. V.L. : C3R

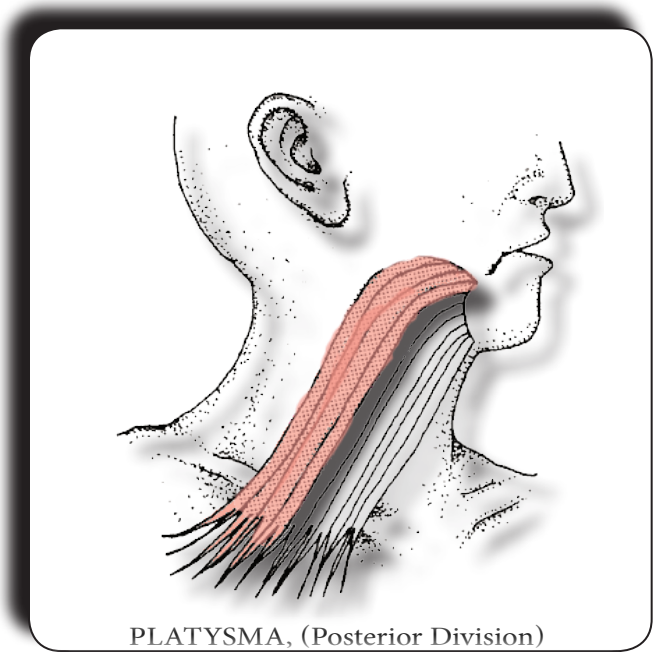
M. M. : C3

CRANIAL: Temporal

FOOT: Cuboid

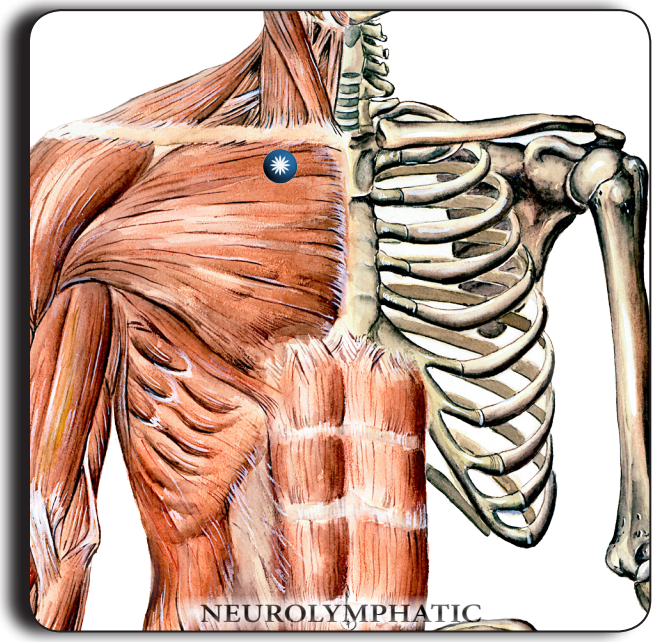
NUTRIENT SOURCE: Folic Acid and B12
1. Core B12 (NW)
2. Core Folic Acid (NW)





PLATYSMA, (Posterior Division)

NEUROVASCULAR



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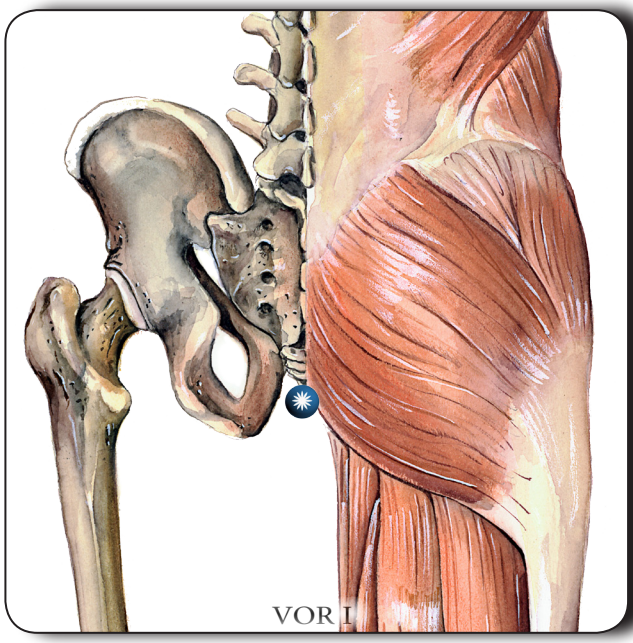
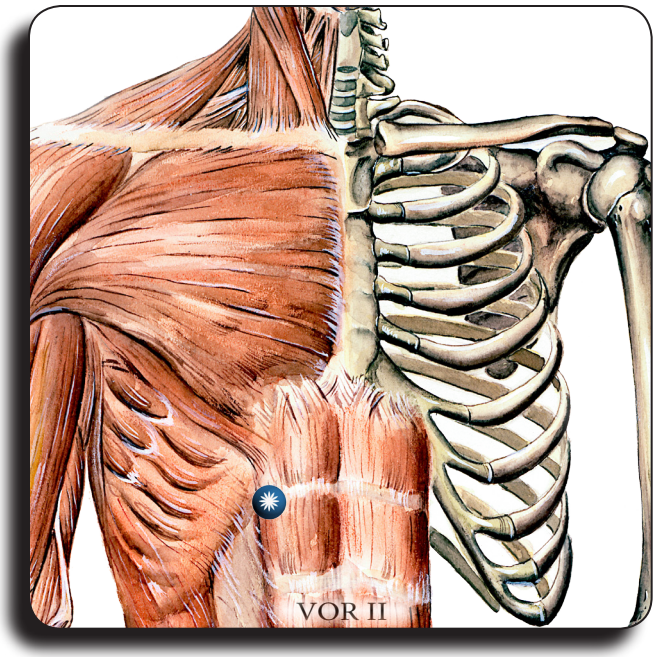
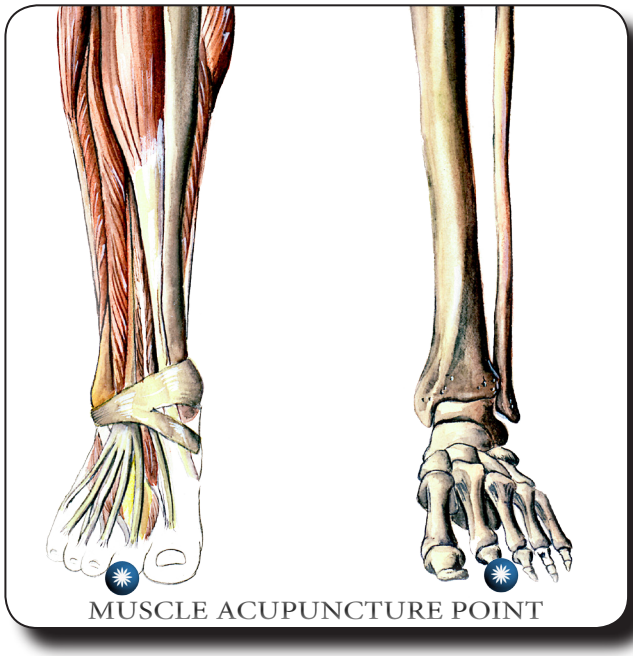


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 288: PLATYSMA, (Posterior Division)

ORIGIN: Those fibers whose origin is from the deltoid area. Sometimes called the posterior fibers.

INSERTION: The posterior fibers insert on the mandible below the oblique line and into the facial muscles at the angle of the mouth.

ACTION: Assists in opening the jaw. Draws the outer part of the lower lip backward.

TEST:

Use the indirect muscle test. Follow the directions under action and then retest intact muscle.

NEUROVASCULAR: (Ant/BL) Mandible just lateral to the pogonion.

NEUROLYMPHATIC: (Ant/R) 1st ICS, 1/2" lateral to the sternum.

VISCERAL ORGAN:

I. *Rectum - Lymphatics:* (Post/Midline) of the pelvis, posterior aspect, pelvic floor, 12 o'clock on rectal orifice.

II. *Pancreas - Proteolytic:* (Ant/R) Rectus Abdominis, third section, St21.

M. A. P. : St45

V.L. : T11R

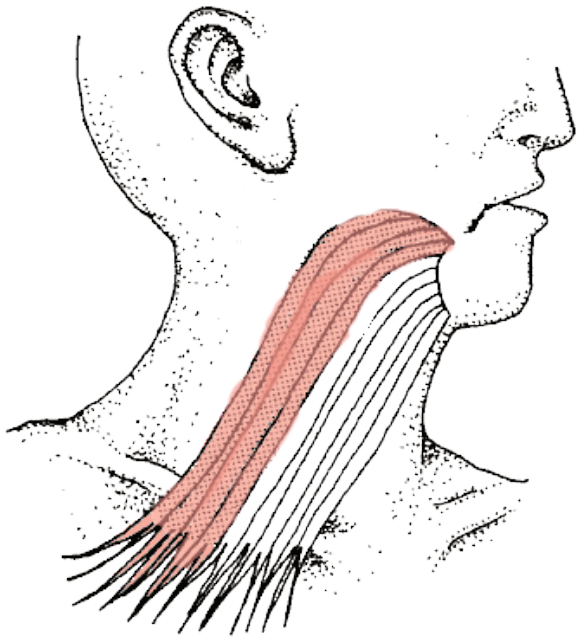
L. B. V.L. : C7R

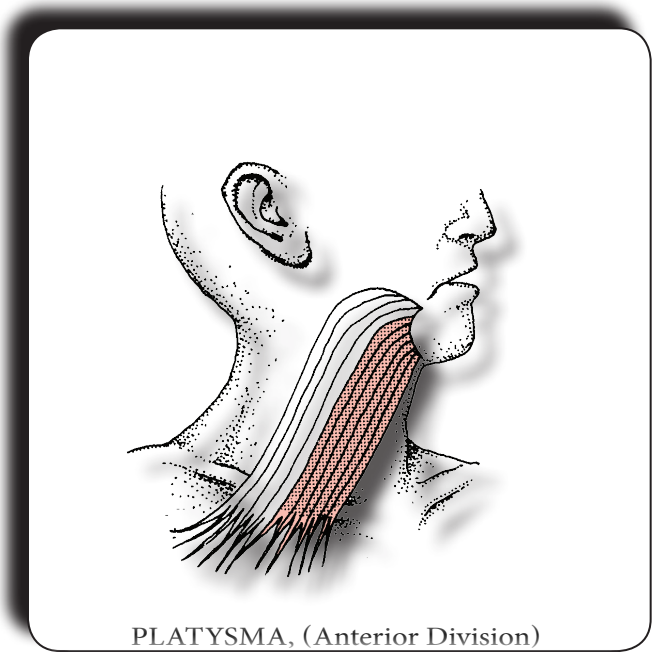
M. M. : CN VII

CRANIAL: Inferior Conchae

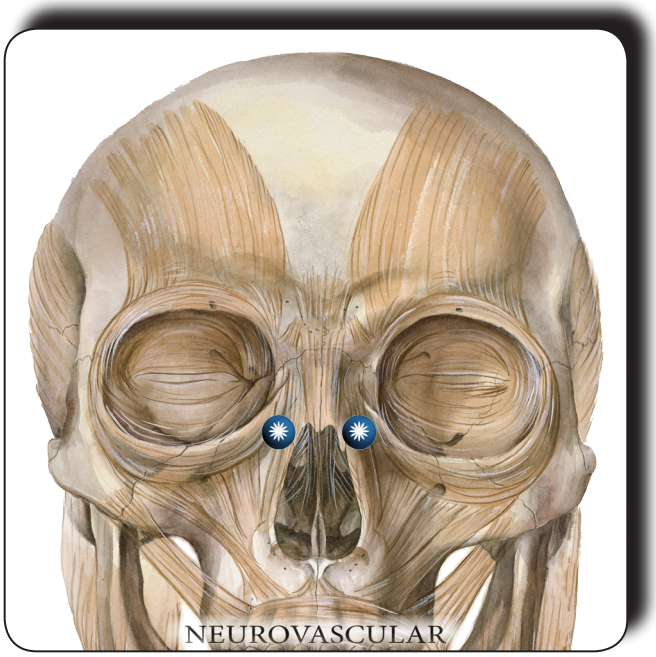
FOOT: 1st phalanx, 2nd toe

NUTRIENT SOURCE: Pantothenic Acid
1.Core Pantothenic Acid (NW)

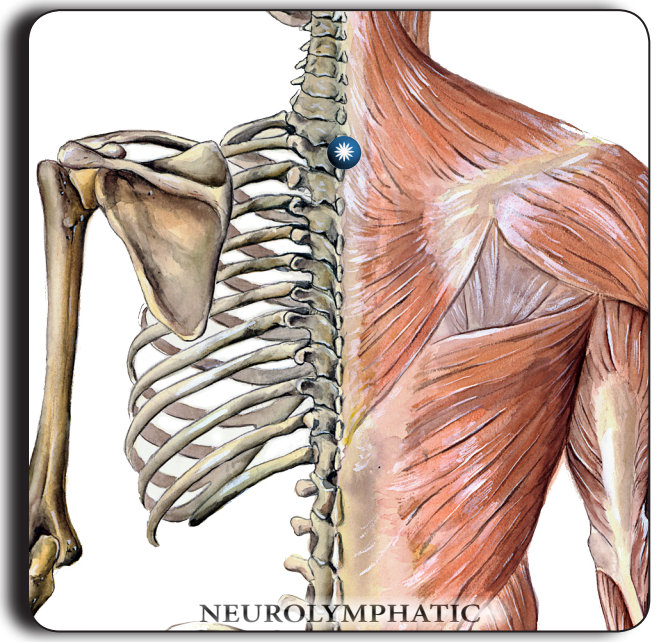




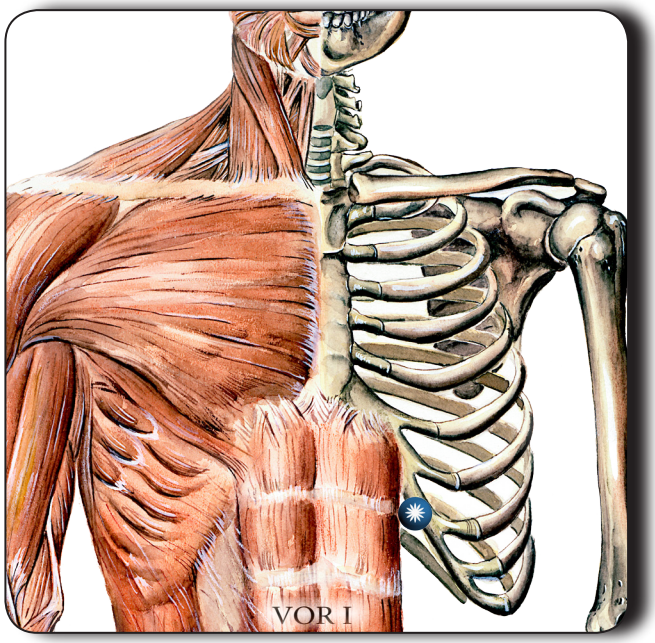
PLATYSMA, (Anterior Division)



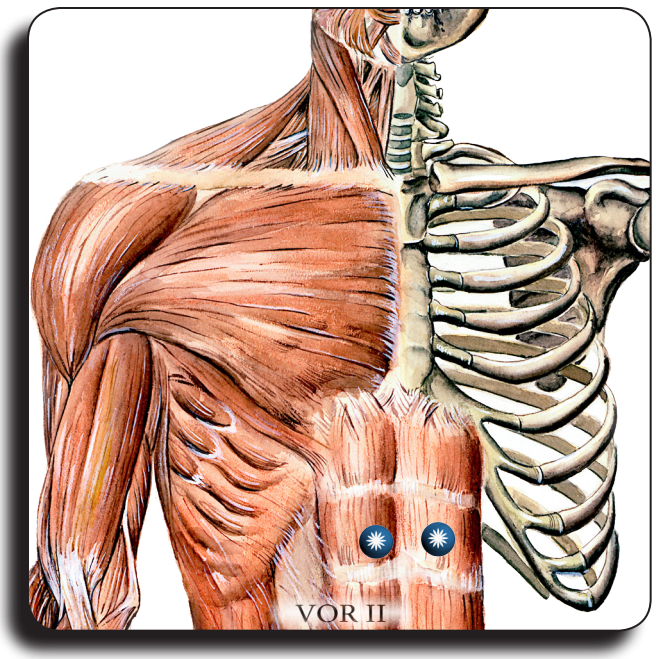
NEUROVASCULAR



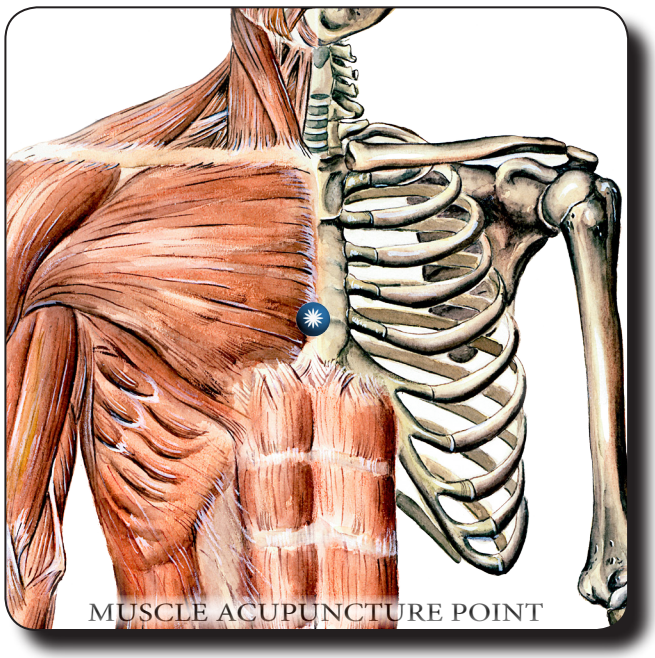
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 286: PLATYSMA, (Anterior Division)

ORIGIN: Fascia covering the upper parts of the Pectoralis Major and Deltoid.

INSERTION: Anterior fibers interlace below and behind the symphysis menti.

ACTION: Draws the outer part of the lower lip downward and assists in opening the jaw.

TEST:

Expression of horror, lower lips downward, then open jaw slightly. Use indirect muscle test before and during the above. Note change.

NEUROVASCULAR: (Ant/BL) Maxillary and nasal suture at the level of the inferior aspect of the orbit.

NEUROLYMPHATIC: (Post/Midline) GV 13 between the spinous processes of Tl and T2.

VISCERAL ORGAN:

I. *Pancreas - Sugar:* (Ant/L) Ribcage. Costocartilage between the 7th and 8th ribs.

II. *Duodenum - descending portion:* (Ant/BL) Rectus Abdominis, third section, 1/2" superior to the origin of the medial aspect.

M. A. P. : Cv16.5

V.L. : T1R

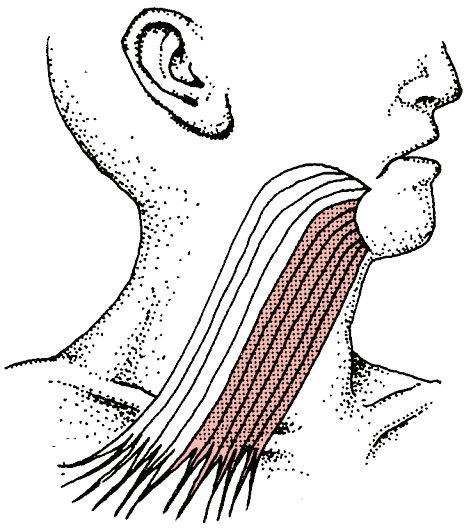
L. B. V.L. : T10R

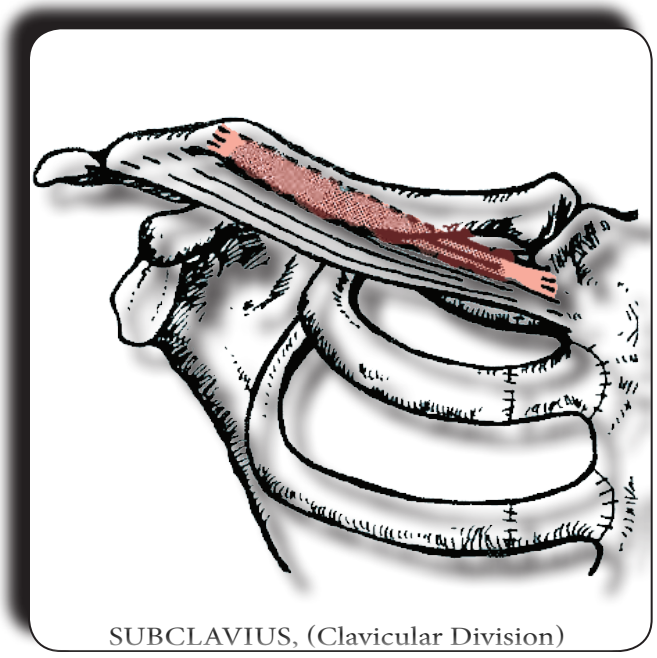
M. M. : CN VII

CRANIAL: Zygomatic

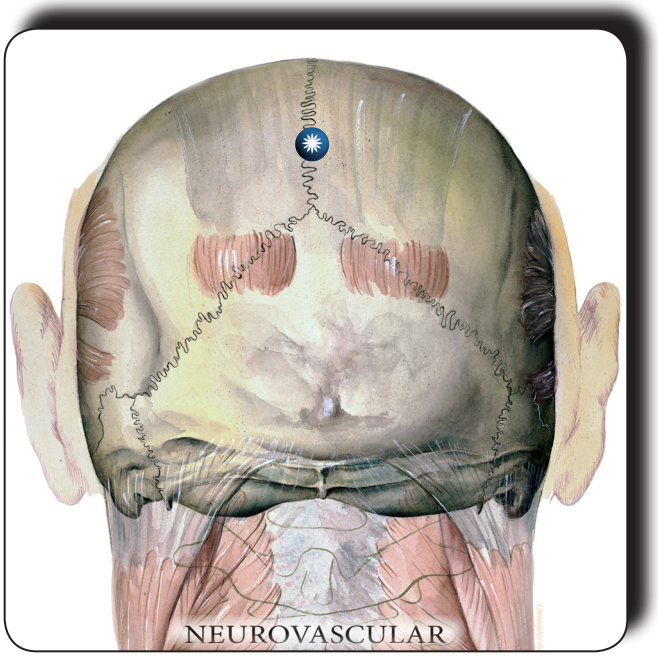
FOOT: 3rd Cuneiform, 4th Metatarsal

NUTRIENT SOURCE: B2 (Riboflavin)
1. Core B2 (NW)





SUBCLAVIUS, (Clavicular Division)



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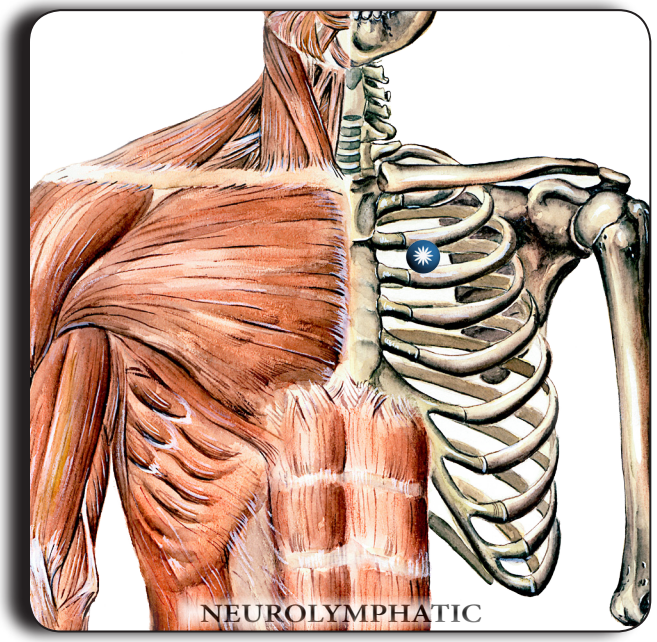
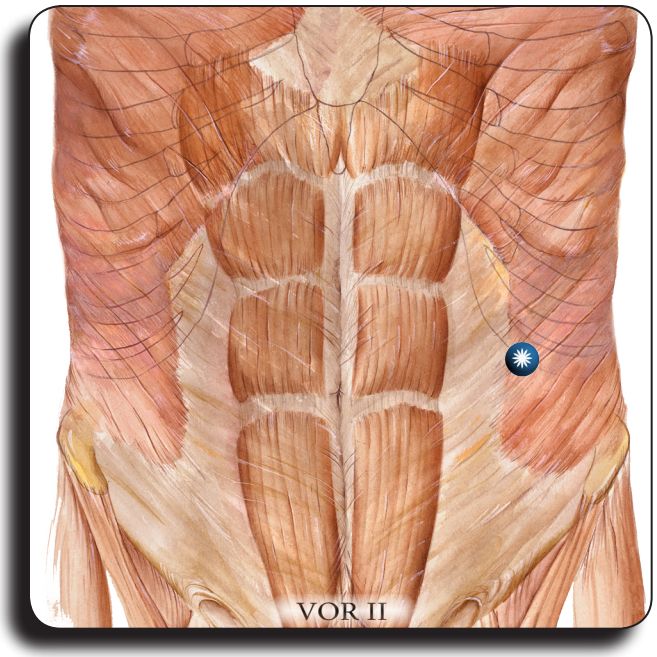


NEUROLYMPHATIC

VOR I



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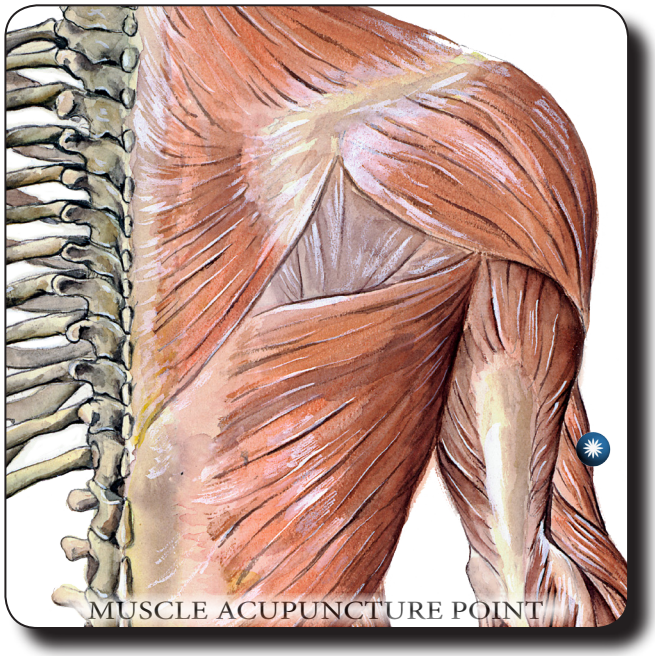


MUSCLE ACUPUNCTURE POINT

Muscle 410: SUBCLAVIUS, (Clavicular Division)

ORIGIN: Upper border of 1st rib and its cartilage.

INSERTION: Groove on underside of clavicle.

ACTION: Draws the clavicle forward and downward.

TEST:

Patient: Supine. Abduct arm 180 degrees to side of head. Internally rotate arm until palmar surface of hand faces away from head

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Ipsilateral forearm to abduct arm through coronal plane.

NOTE: Muscle is most active the first 10 degrees of abduction from head and requires assistance from an intact anterior Deltoid muscle.

NEUROVASCULAR: (Post/Midline) Cranium, superior aspect, sagittal suture , 2" anterior to posterior fontanelle.

NEUROLYMPHATIC: (Ant/L) 2nd ICS, 2" lateral to sternum.

VISCERAL ORGAN:

I. *External Ear*: (Lat/BL) neck, posterior lateral aspect, belly of upper Trapezius at level of C3.

II. *Pancreas Duct System*: (Ant/L) Abdomen, tip of 10th rib.

M. A. P. : Li13.3

V.L. : T11R

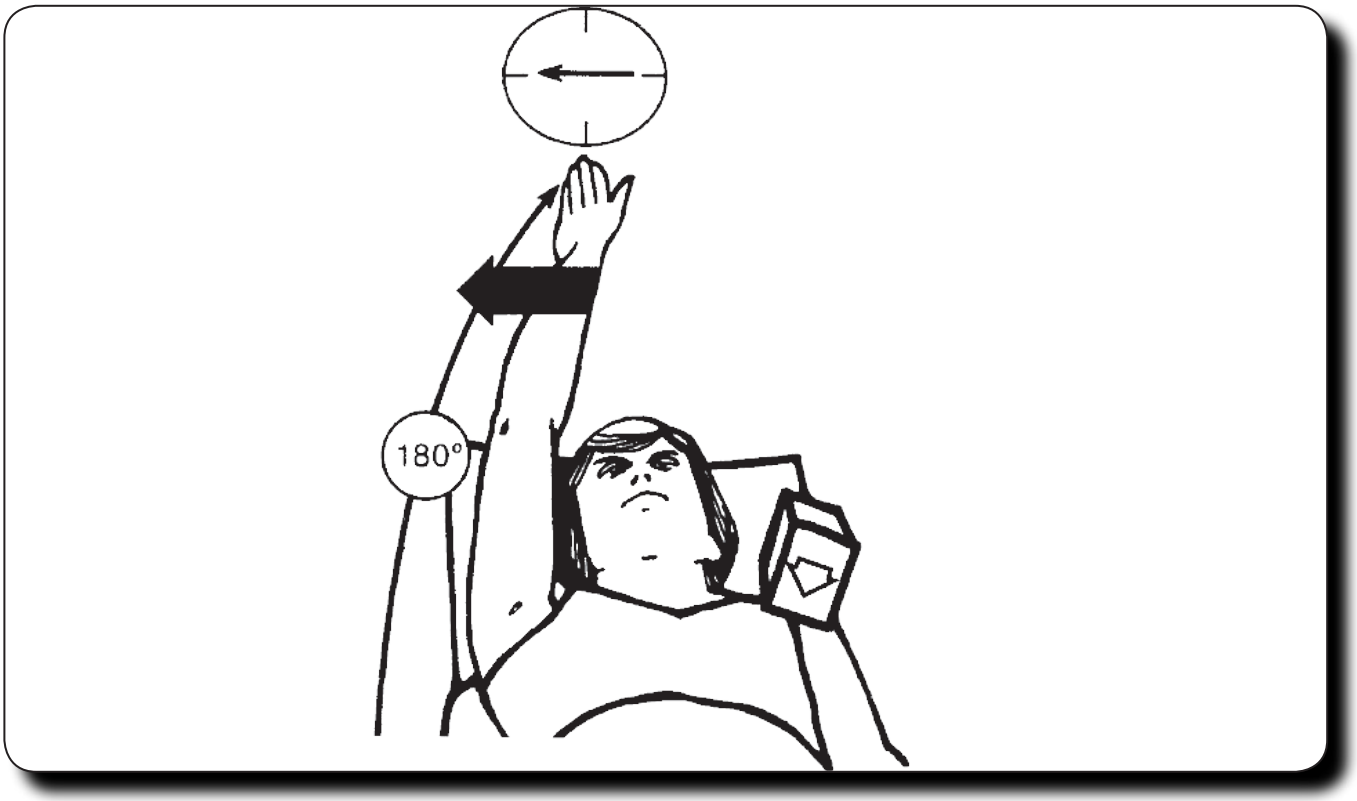
L. B. V.L. : C7R

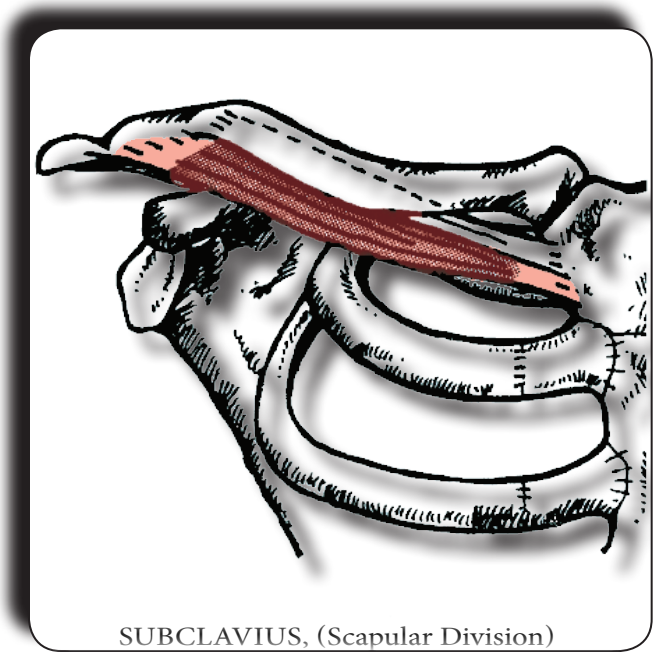
M. M. : C6

CRANIAL: Temporal

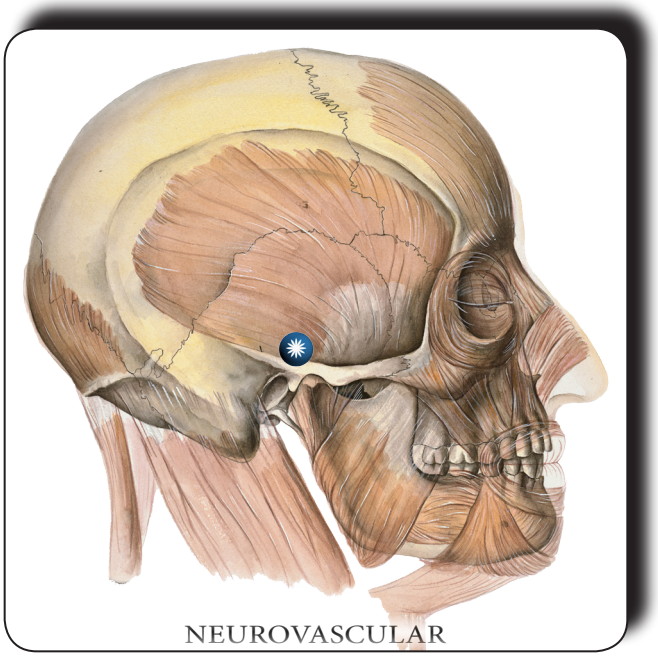
FOOT: Cuboid

NUTRIENT SOURCE:
1. Silicea - Homeopathic 6X (HP)





SUBCLAVIUS, (Scapular Division)



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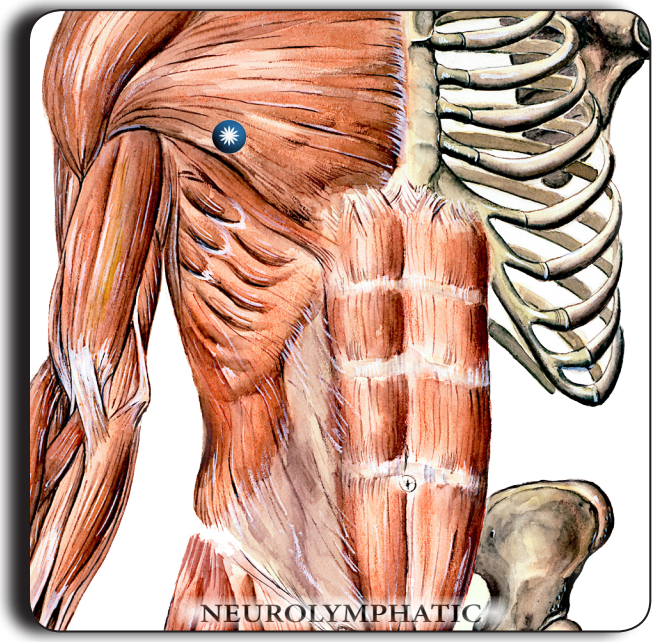
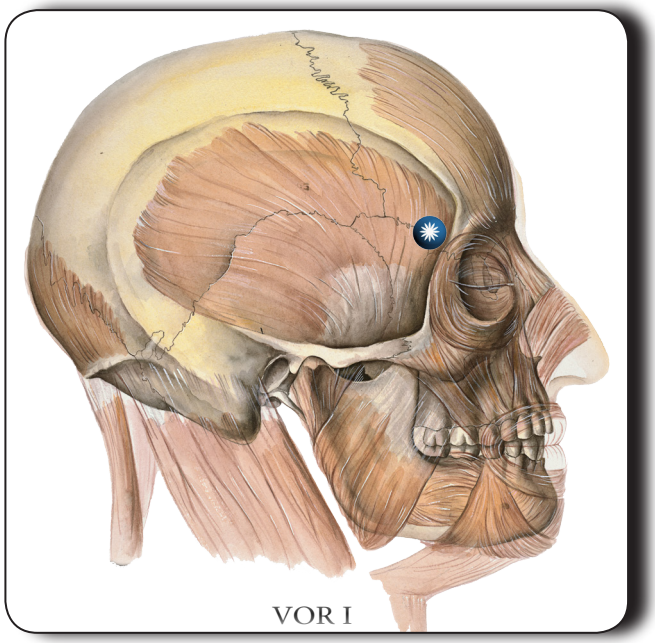
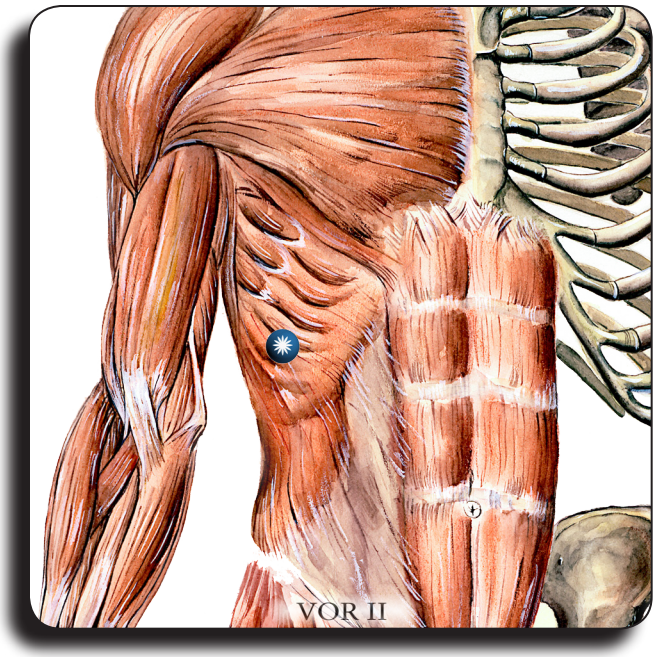


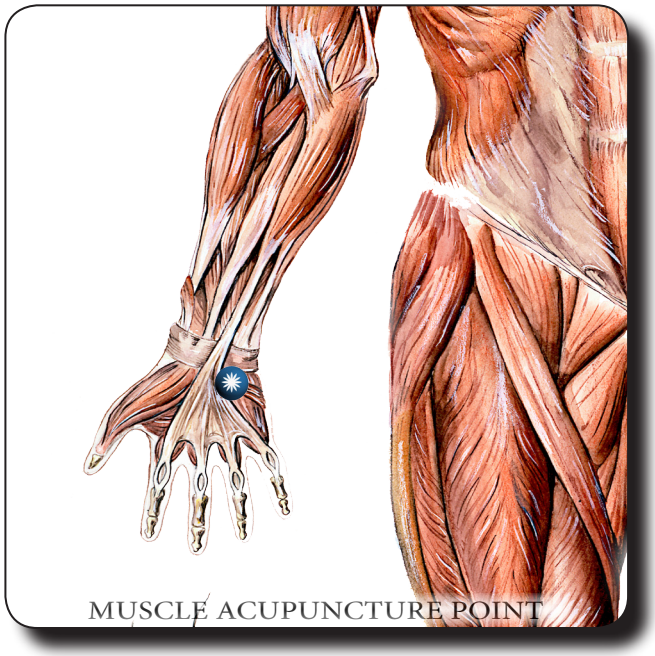
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 412: SUBCLAVIUS, (Scapular Division)

ORIGIN: Manubrium.

INSERTION: Junction of clavicle and acromion process of scapula. Occasionally coracoid process of scapula.

ACTION: Draws the scapula forward and downward.

TEST:

Patient Supine. Abduct arm 180 degrees to side of head. Internally rotate arm until palmar surface of hand faces away from head.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Ipsilateral forearm to abduct and flex arm through an oblique plane.

NOTE: Muscle is most active the first 10 degrees of abduction from head and requires assistance from an intact anterior Deltoid muscle.

NEUROVASCULAR: (Lat) Temporal bone, squamosal section, 1/2" superior to EAC.

NEUROLYMPHATIC: (Ant/R) 4th ICS, just lateral to nipple.

VISCERAL ORGAN:

I. *Posterior Pituitary:* (Lat/BL) Frontal bone, lateral aspect, T23 superior and posterior to eye.

II. *Liver:* (Ant/R) Rib cage, 8th rib just before costocartilage junction.

M. A. P. : H7.2

V.L. : L2L

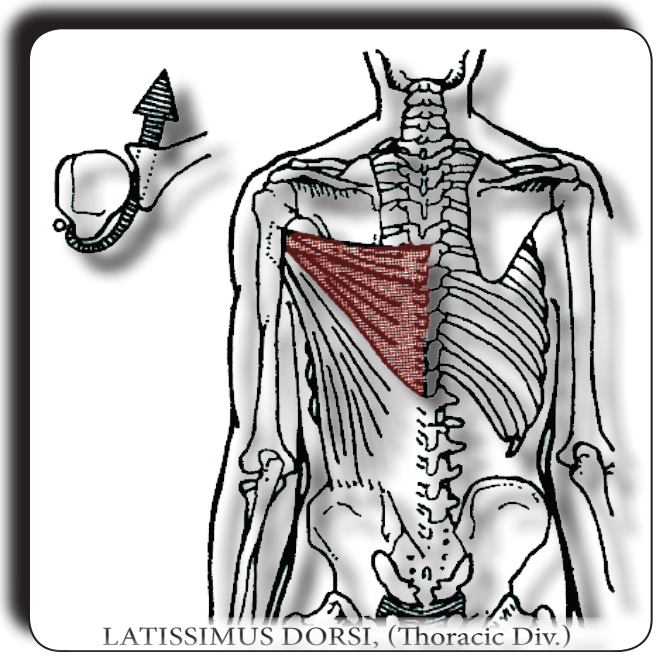
L. B. V.L. : C4L

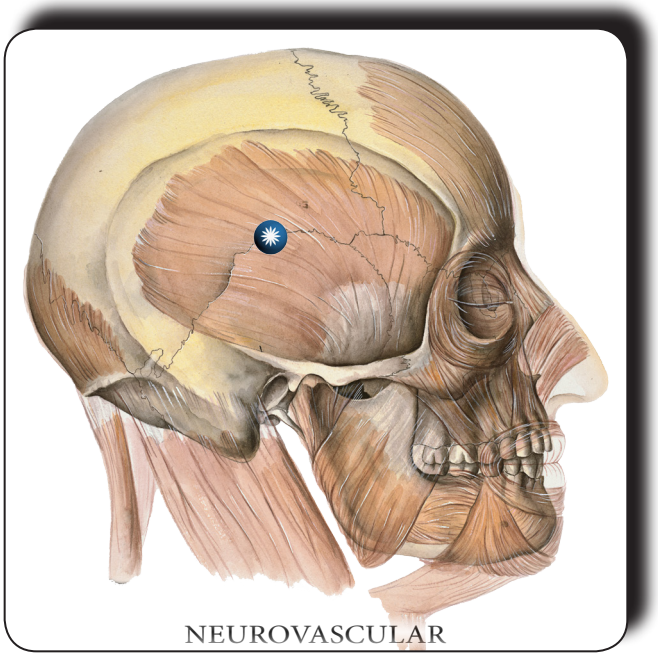
M. M. : C6

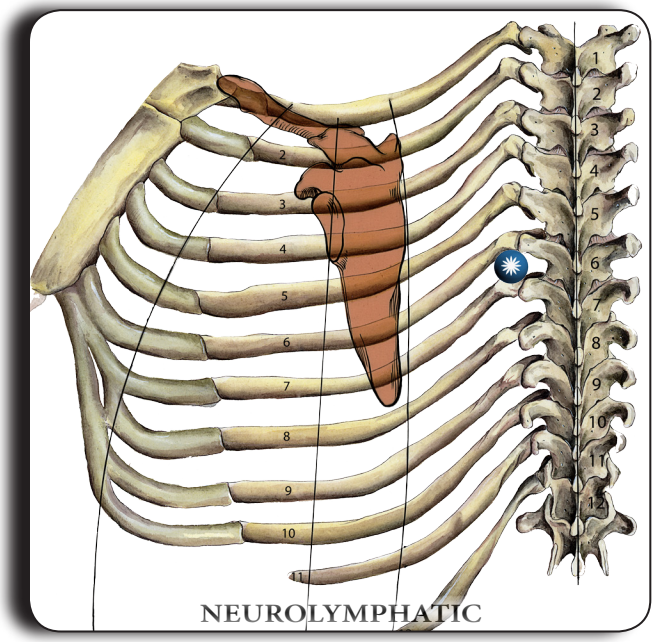
CRANIAL: Zygoma

FOOT: 3rd Cuneiform

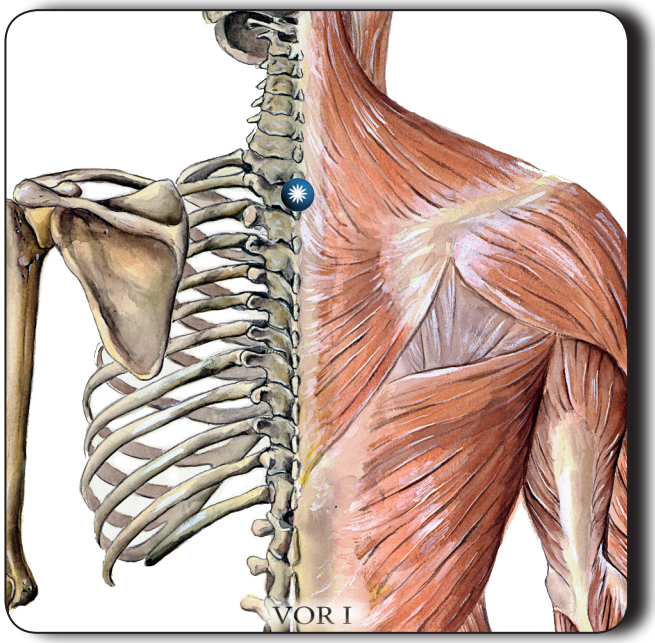
NUTRIENT SOURCE:
1 Cyro-yeast (S)

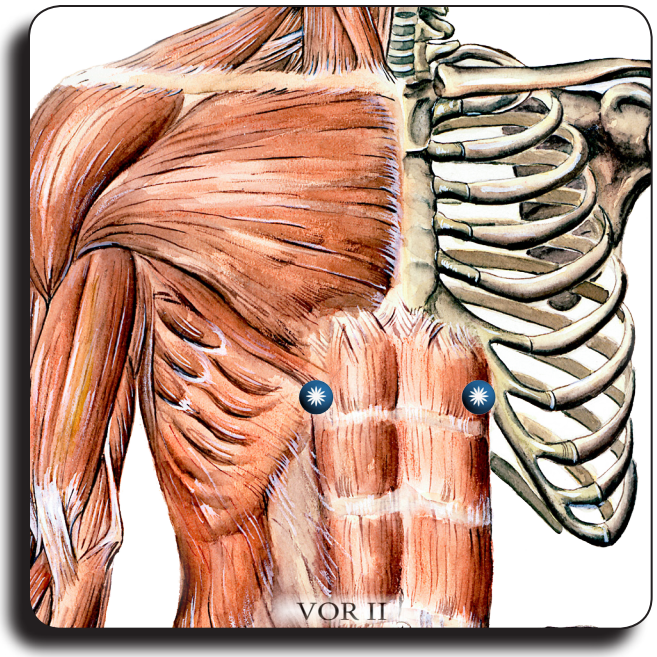

LATISSIMUS DORSI, (Thoracic Div.)

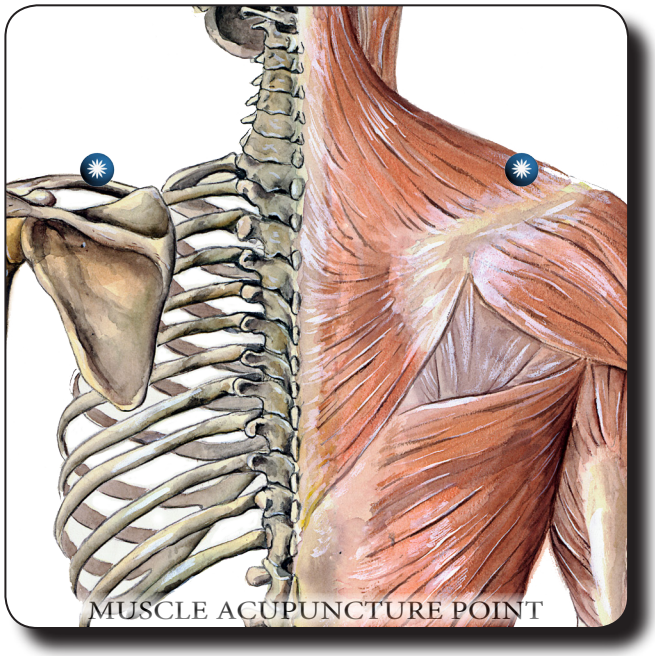

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 414: LATISSIMUS DORSI, (Thoracic Division)

ORIGIN: Spinous process of the 6th through 12th thoracic vertebrae and lumbosacral fascia.

INSERTION: Intertubercular groove of humerus and tip of scapula.

ACTION: Extends, adducts and internally rotates the arm. Acting on the shoulder, it draws it downward and backward.

TEST:

Patient: Supine. With elbow extended, adduct and internally rotate arm on shoulder until thumb is against thigh.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral thigh.
Contact: Distal medial surface of forearm to abduct arm through a coronal plane.

NEUROVASCULAR: (Lat) Cranium, lateral aspect, squamosal suture, superior to ear.

NEUROLYMPHATIC: (Post/L) 6th ICS, at spine.

VISCERAL ORGAN:

I. *Ileum - Lymphatics:* (Post/Midline) of the spinal column, GV13 between T1 and T2.

II. *Pancreas - Sugar:* (Ant/BL) Rectus Abdominis, 4th section, inferior to Ribcage and St19.

M. A. P. : Tw14.7

V.L. : T7L

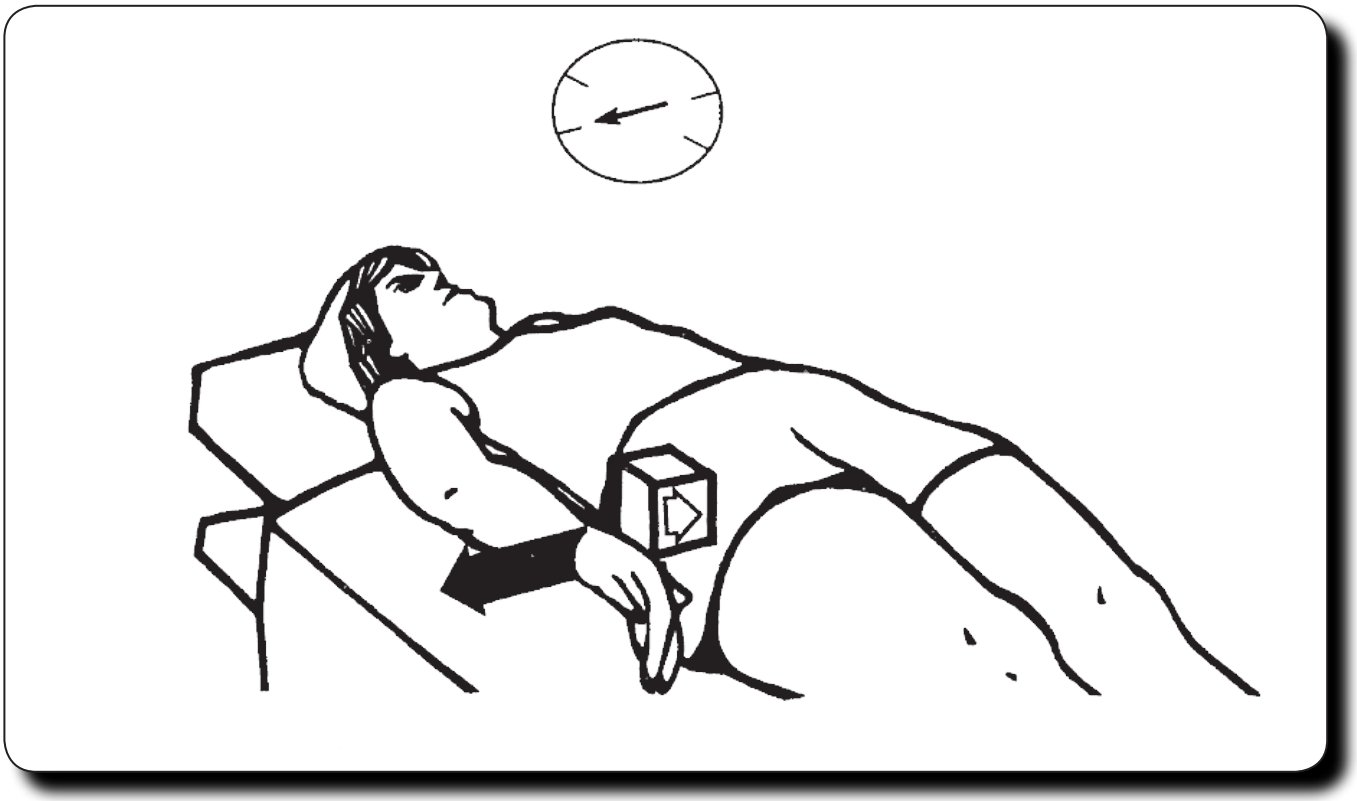
L. B. V.L. : T4L

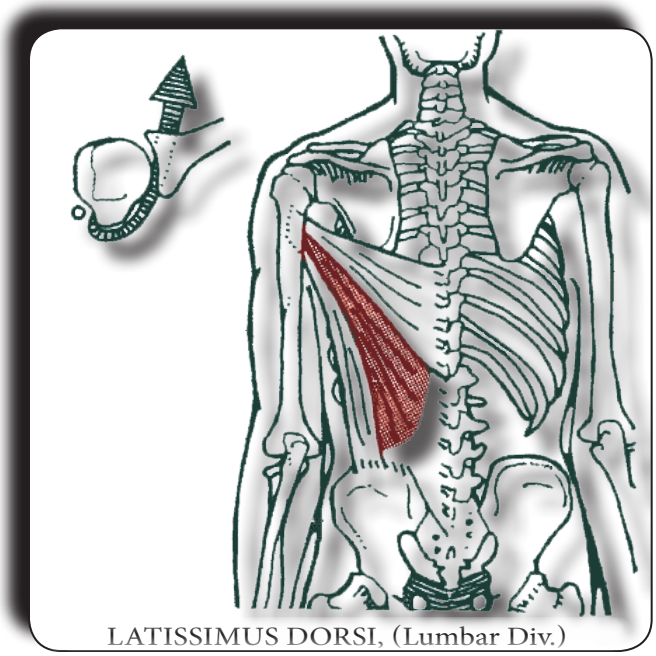
M. M. : C7

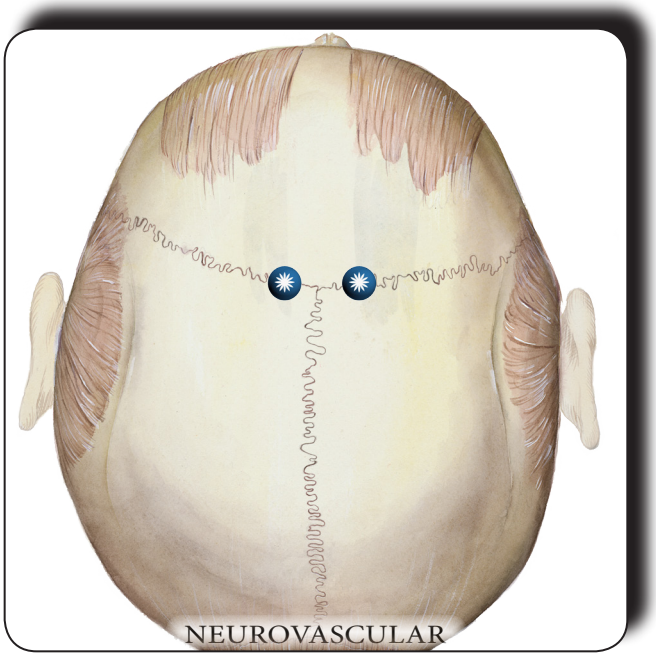
CRANIAL: None

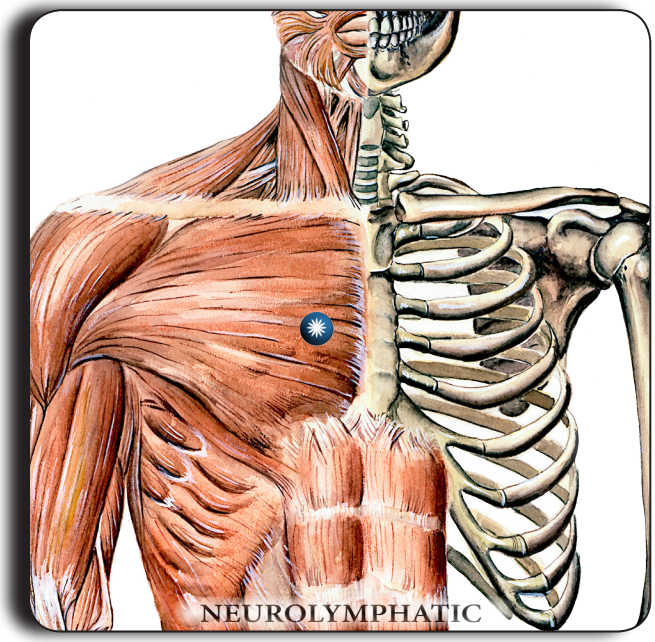
FOOT: None

NUTRIENT SOURCE:
1. Utrophin (zinc) (S)
2. Betacol (zinc) (S)

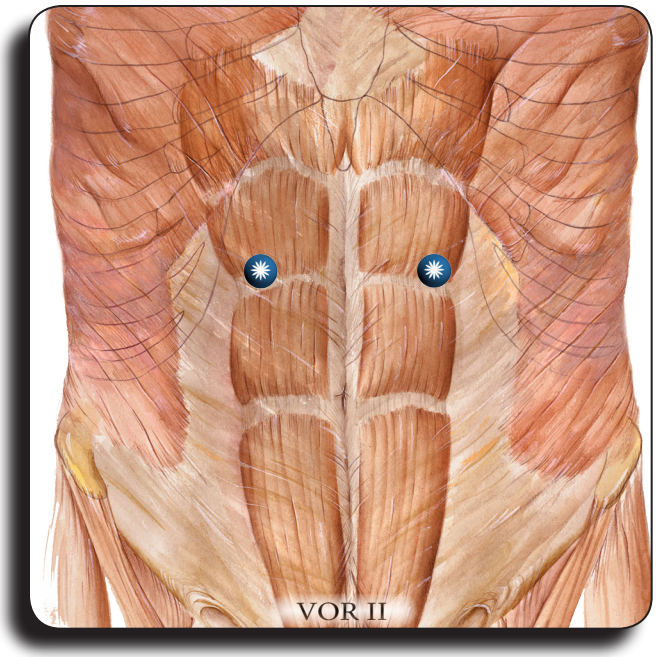


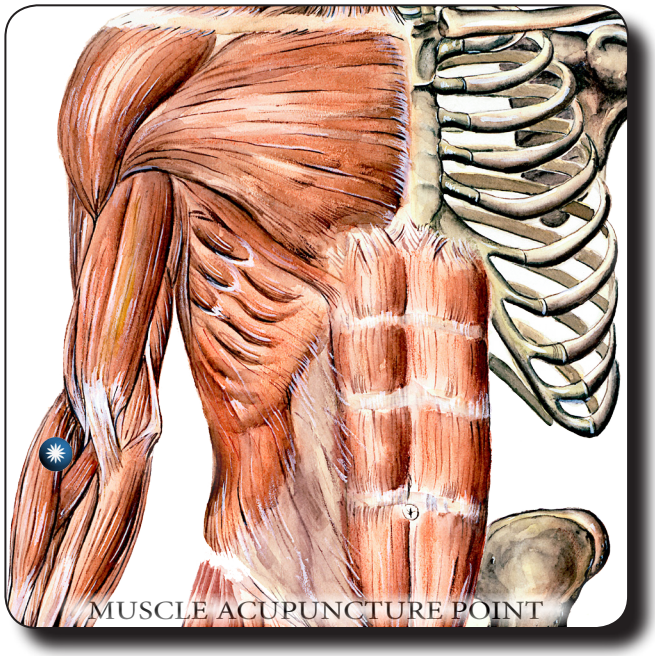

LATISSIMUS DORSI, (Lumbar Div.)


NEUROVASCULAR


NEUROLYMPHATIC

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 416: LATISSIMUS DORSI, (Lumbar Division)

ORIGIN: Spinous process of all lumbar and sacral vertebrae.

INSERTION: Bottom of intertubercular groove of humerus.

ACTION: Extends, adducts and internally rotates the arm. Acting on the shoulder, it draws it downward and backward.

TEST:

Patient: Supine. With elbow extended, adduct and internally rotate arm on shoulder until index finger is against thigh.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral thigh.
Contact: Distal dorsum surface of forearm to abduct arm through coronal plane.

NEUROVASCULAR: (Sup/BL) Cranium, superior aspect, coronal suture just before anterior fontanelle.

NEUROLYMPHATIC: (Ant/R) 3rd ICS, 2" lateral to sternum.

VISCERAL ORGAN:

I. *Salivary Glands:* (Post/BL) Neck, posterior aspect, transverse process of axis.

II. *Lymphatics - Duodenum:* (Ant/BL) Rectus Abdominis, third section near origin.

M. A. P. : Lu5.2

V.L. : C6R

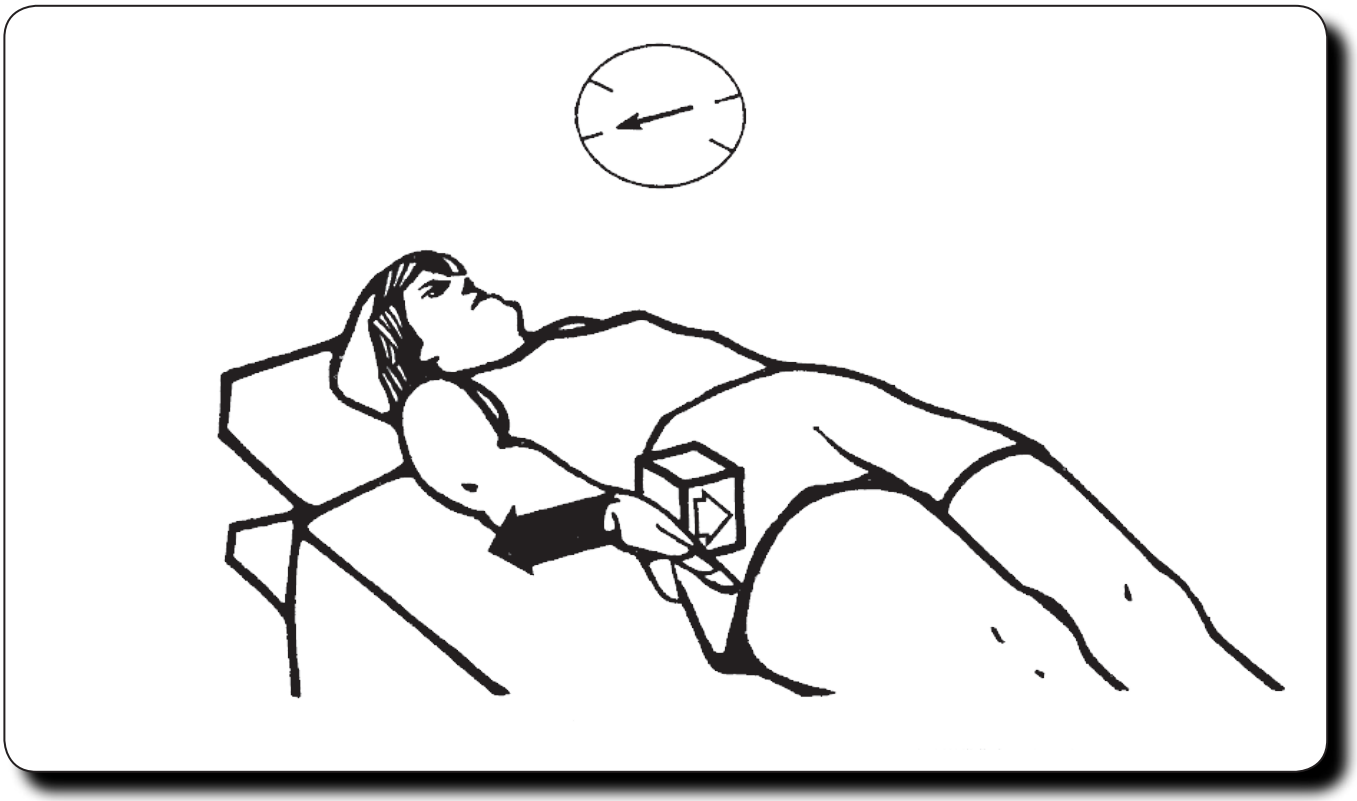
L. B. V.L. : T12R

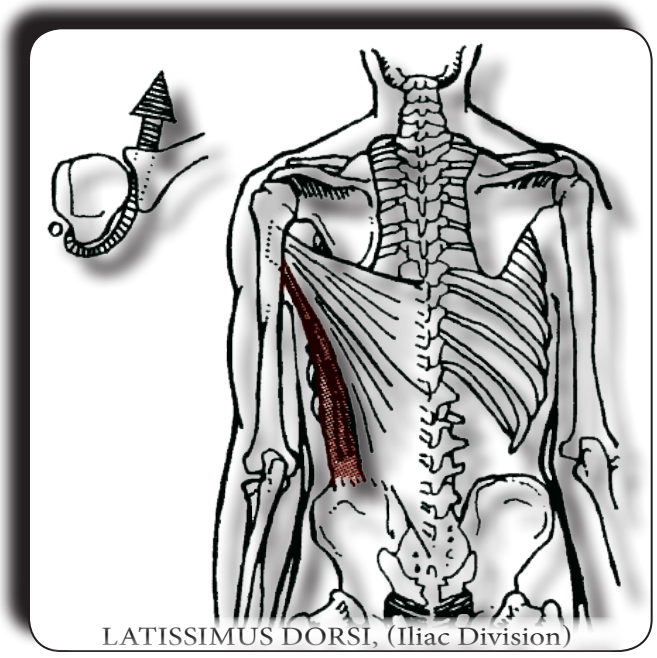
M. M. : T1

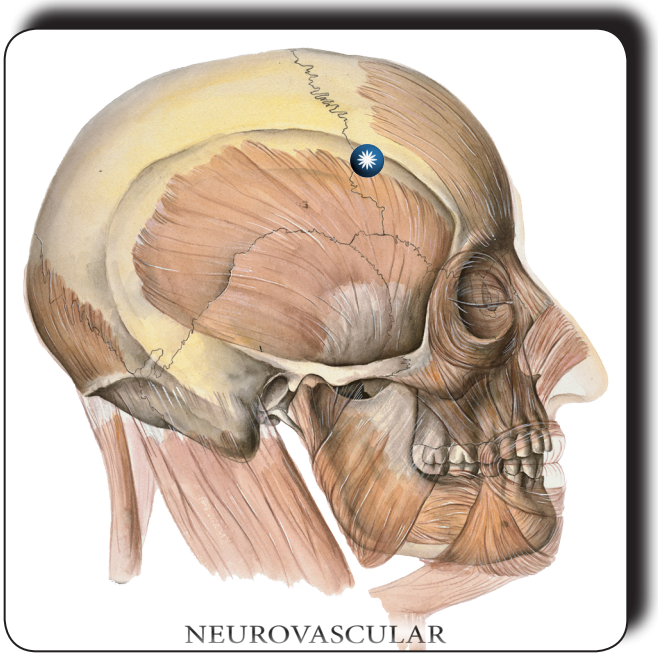
CRANIAL: Sphenoid

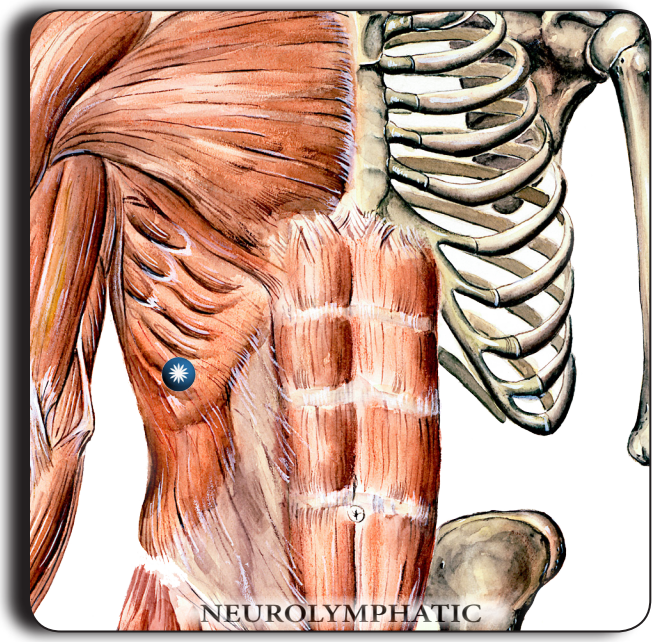
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. Zypan (S)




LATISSIMUS DORSI, (Iliac Division)


NEUROVASCULAR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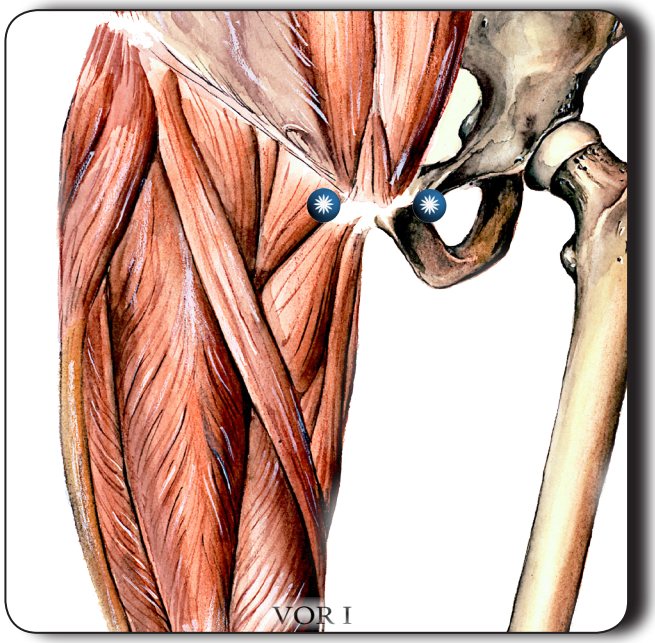
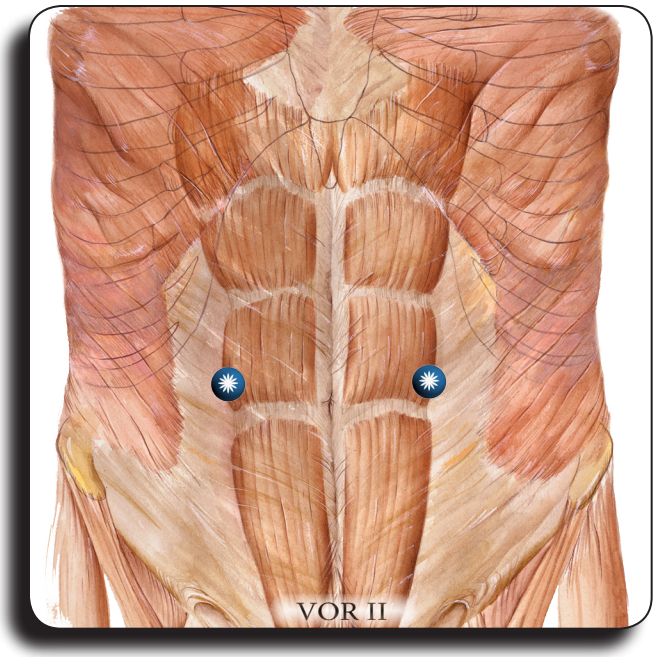
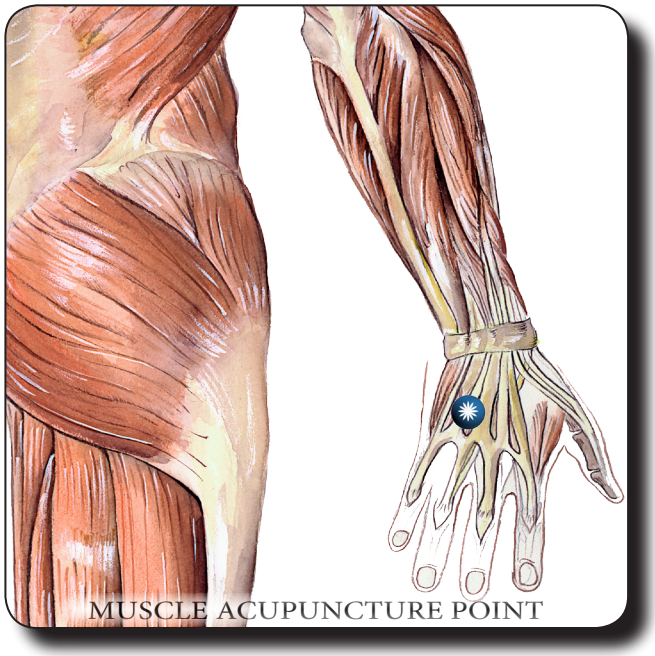

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 418: LATISSIMUS DORSI, (Iliac Division)

ORIGIN: External lip of the crest of the ilium, lateral to margin of the sacrospinalis.

INSERTION: Into the bottom of the intertubercular groove of humerus.

ACTION: Extends, adducts and internally rotates the arm. Acting on the shoulder, it draws it downward and backward.

TEST:

Patient: Supine. With elbow extended, adduct and internally rotate arm on shoulder until dorsum of hand is against thigh.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral thigh.
Contact: Distal dorsum surface of forearm to abduct arm through a coronal plane.

NEUROVASCULAR: (Lat) Cranium, lateral aspect, coronal suture at junction of superior temporal line.

NEUROLYMPHATIC: (Ant/R) 8th ICS, at costocartilage junction near Lv14.

VISCERAL ORGAN:

I. *Urethra - Membranous portion:* (Ant/BL) Pelvis, anterior aspect, superior part of Obturator Foramen.

II. *Colon:* (Ant/BL) Rectus Abdominis, 2nd section, lateral border 1" above origin.

M. A. P. : Tw3

V.L. : L5R

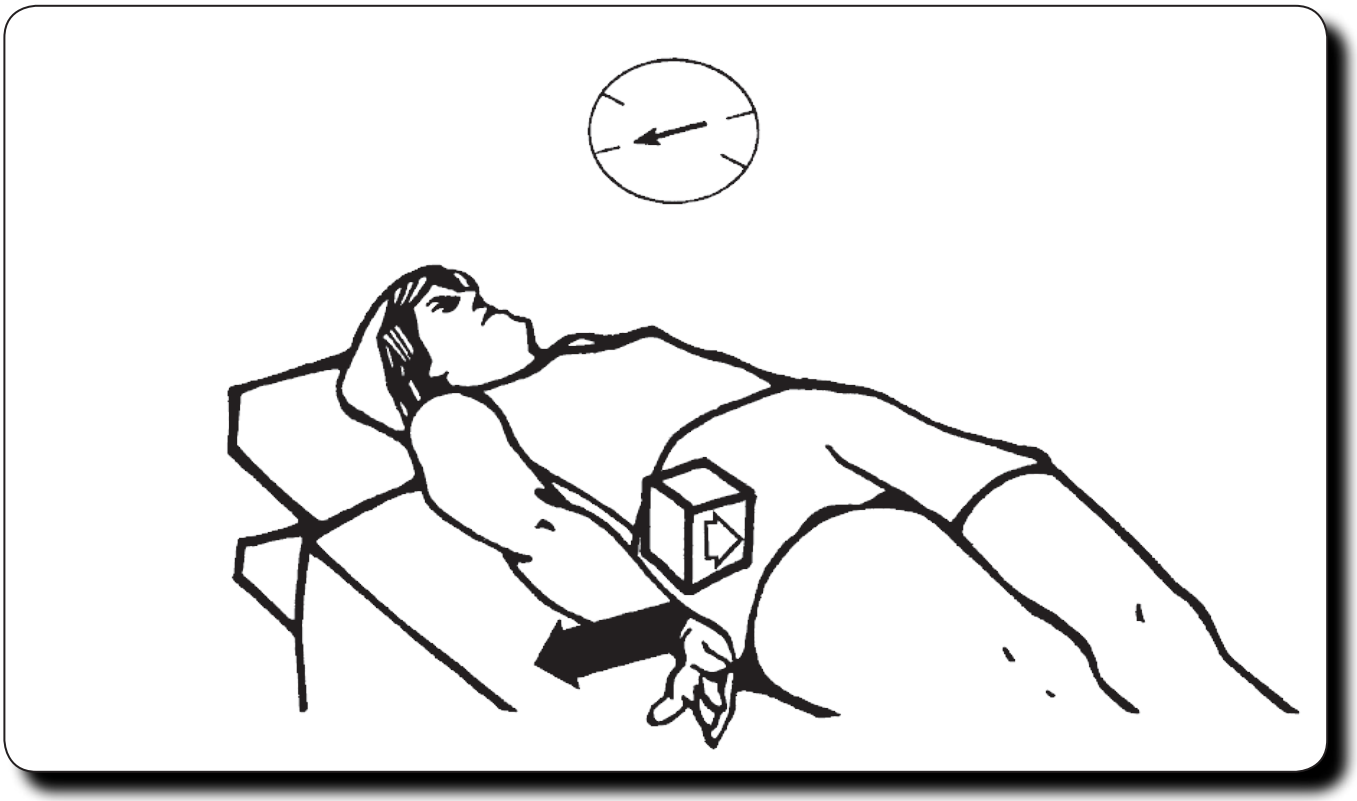
L. B. V.L. : C1R

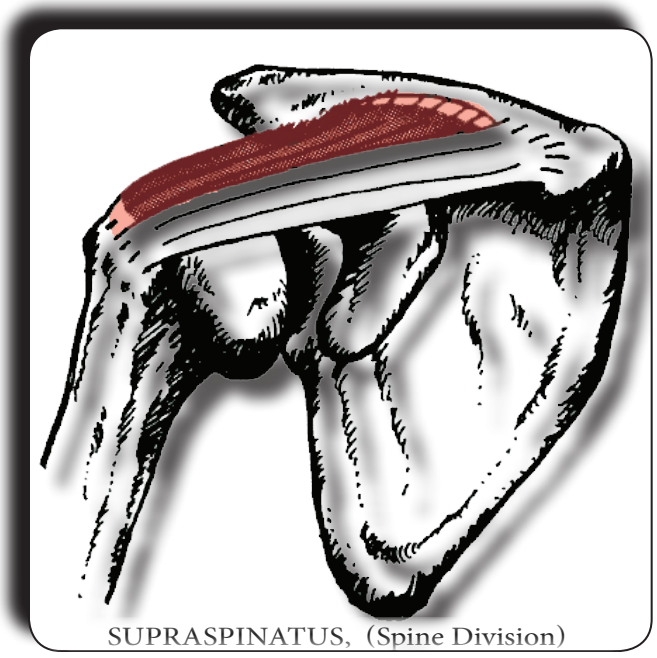
M. M. : T1

CRANIAL: In Research

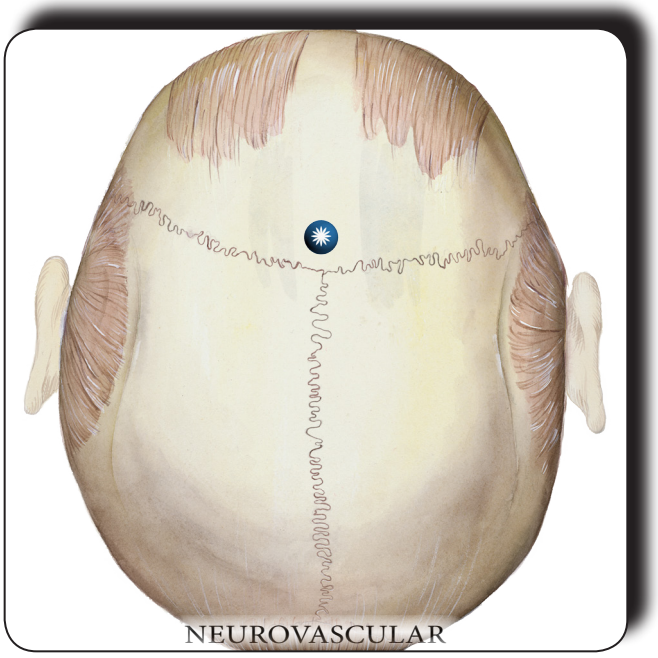
FOOT: In Research

NUTRIENT SOURCE:
1. Organic Minerals (S)

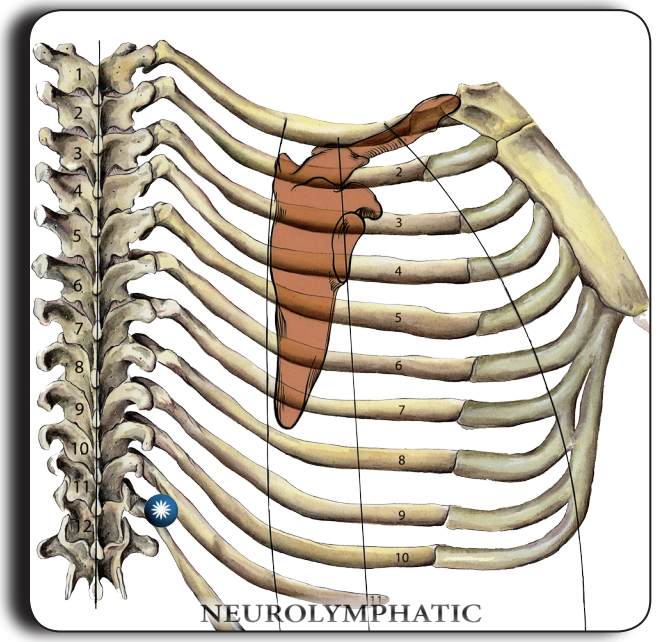




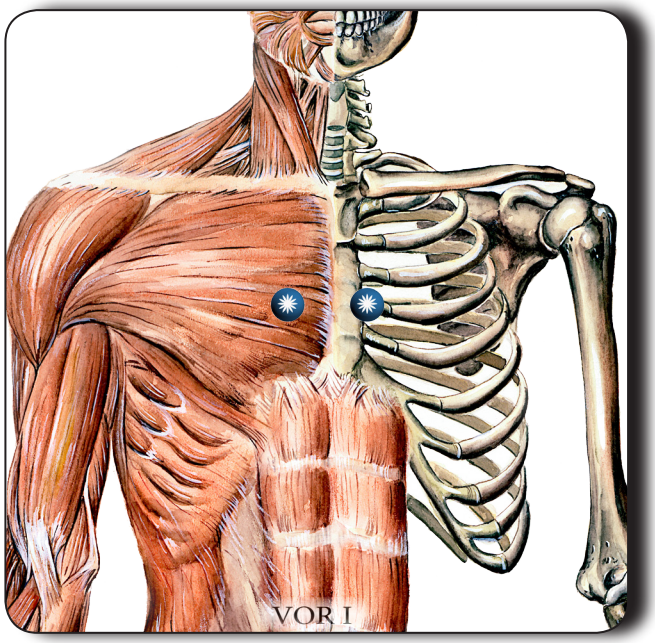
SUPRASPINATUS, (Spine Division)



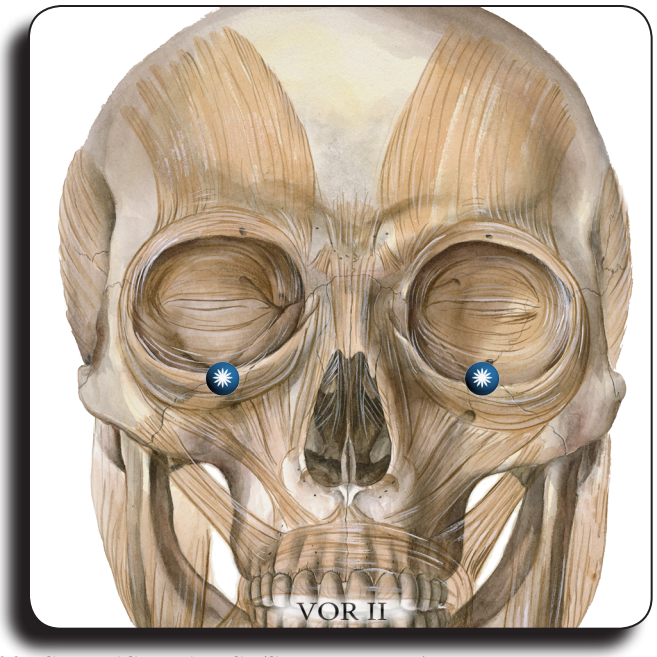
NEUROVASCULAR



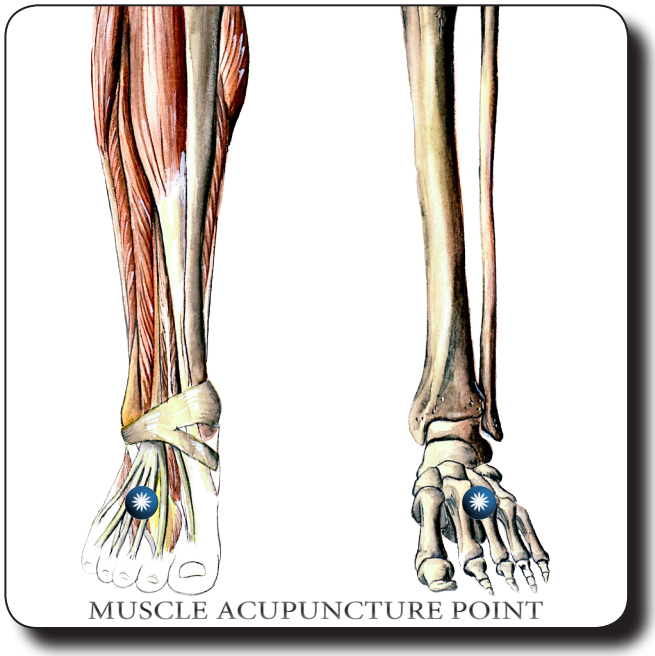
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 420: SUPRASPINATUS, (Spine Division)

ORIGIN: Posterior fibers arising from the spine of the scapula.

INSERTION: Greater tubercle of humerus.

ACTION: Abduction and slight internal rotation of arm on shoulder.

TEST:

Patient: Supine. Abduct 45 degrees and internally rotate arm on shoulder

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Distal aspect of forearm to adduct through coronal plane.

NEUROVASCULAR: (Sup/Midline) Frontal bone, midline, l" anterior to anterior fontanelle.

NEUROLYMPHATIC: (Post/R) 11th ICS, 2" lateral to spine.

VISCERAL ORGAN:

I. *Thymus:* (Ant/BL) Ribcage, anterior aspect, 4th rib at level of costosternal junction.

II. *Maxillary Sinuses:* (Ant/BL) Maxillary bone below eye, St1.

M. A. P. : St43

V.L. : T7R

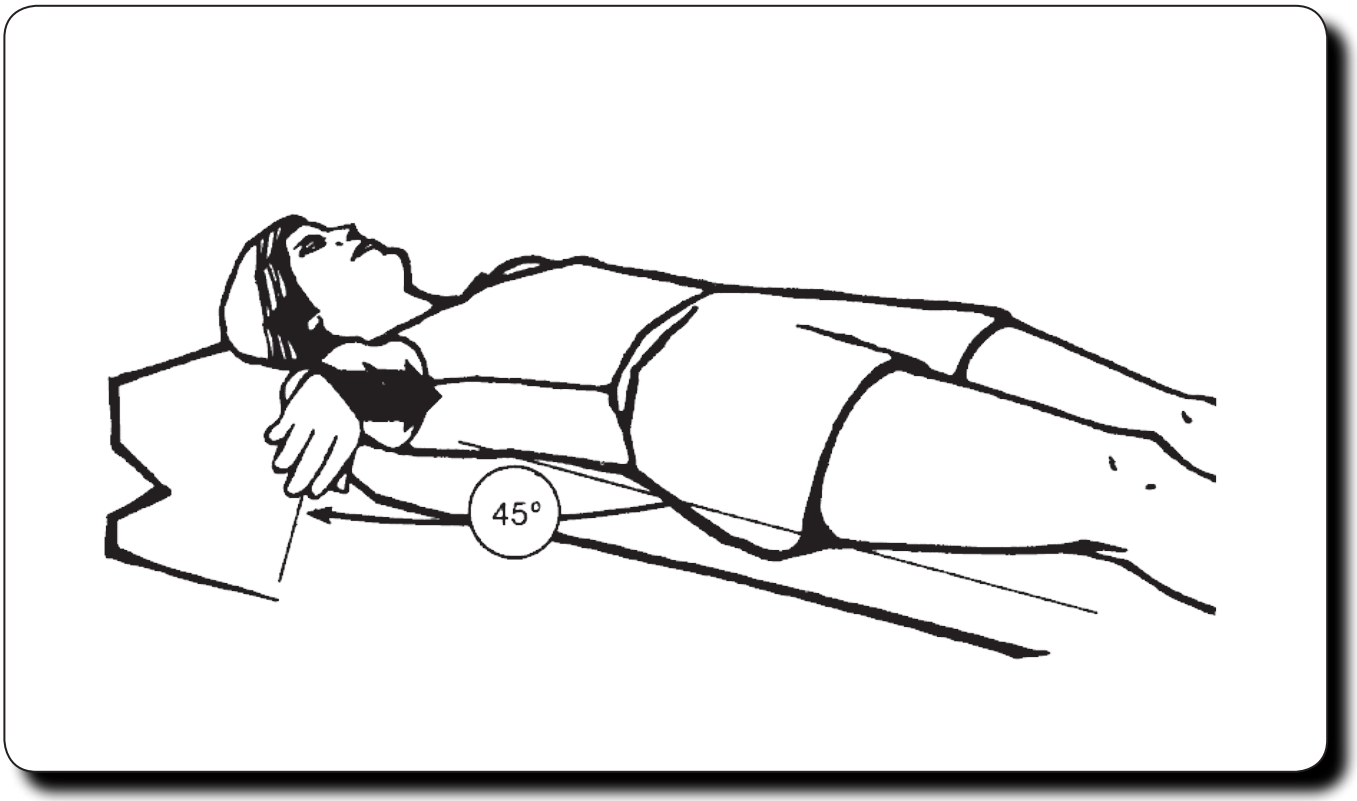
L. B. V.L. : T4R

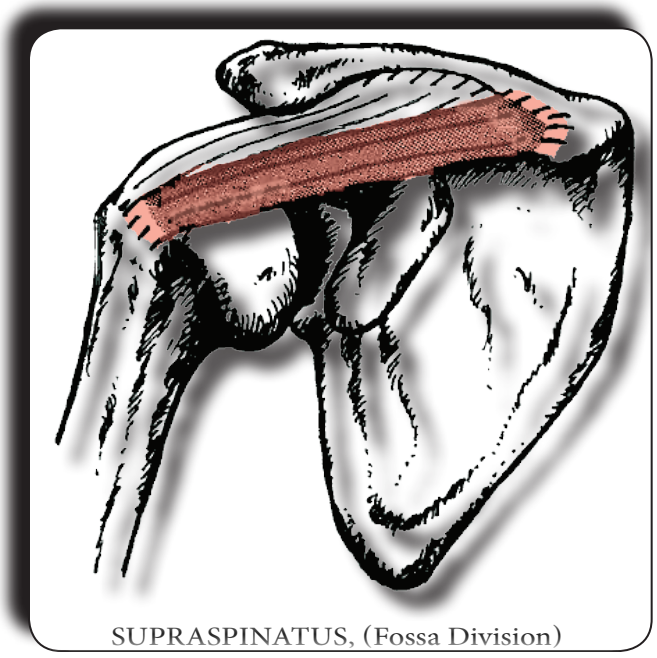
M. M. : C5

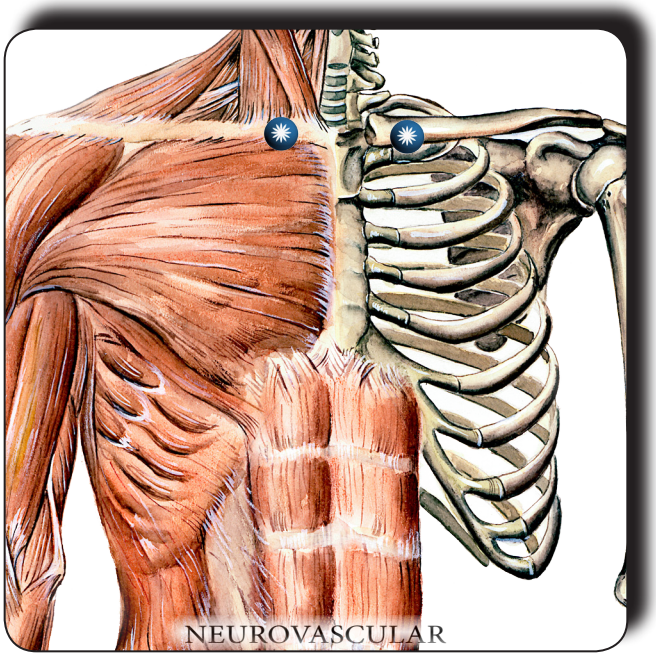
CRANIAL: Mandible

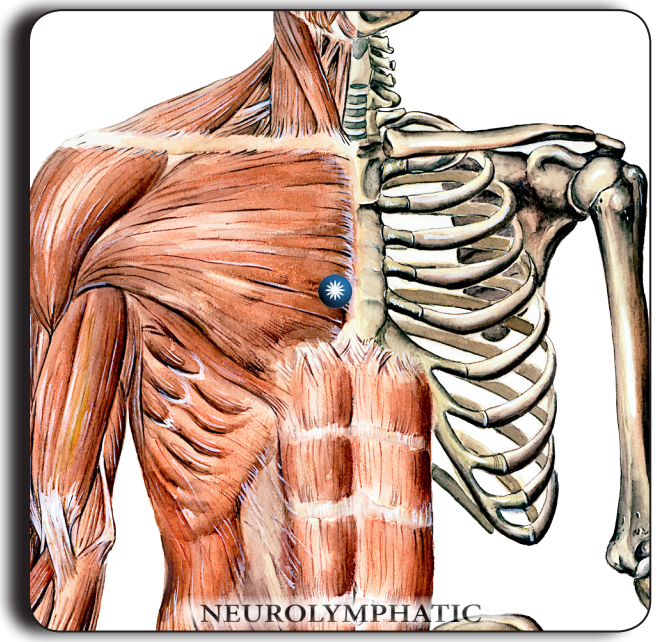
FOOT: Proximal phalanx - big toe

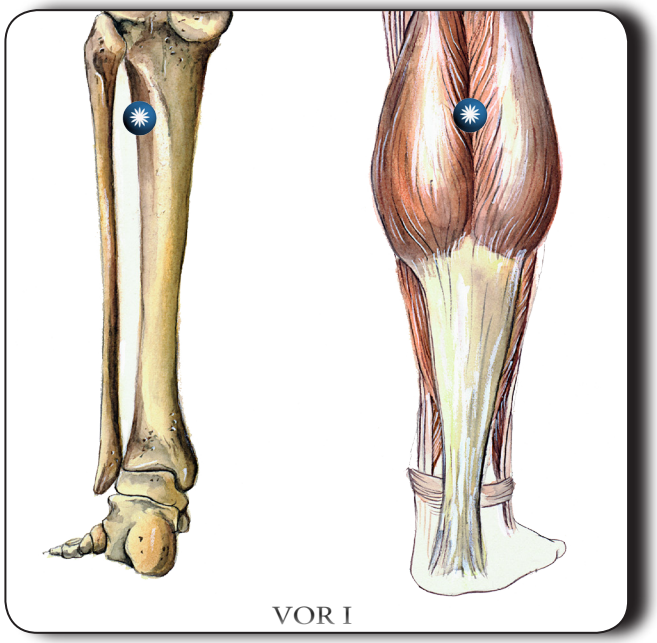
NUTRIENT SOURCE:
1. Fortil B12 (S)

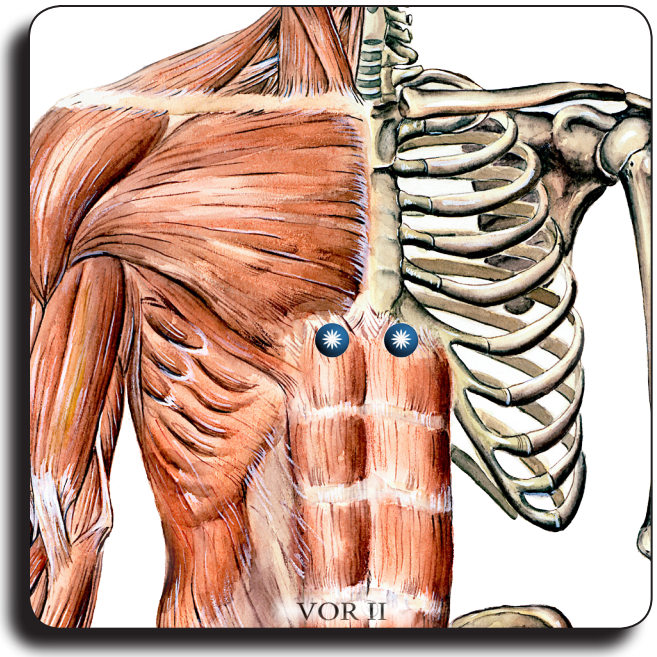


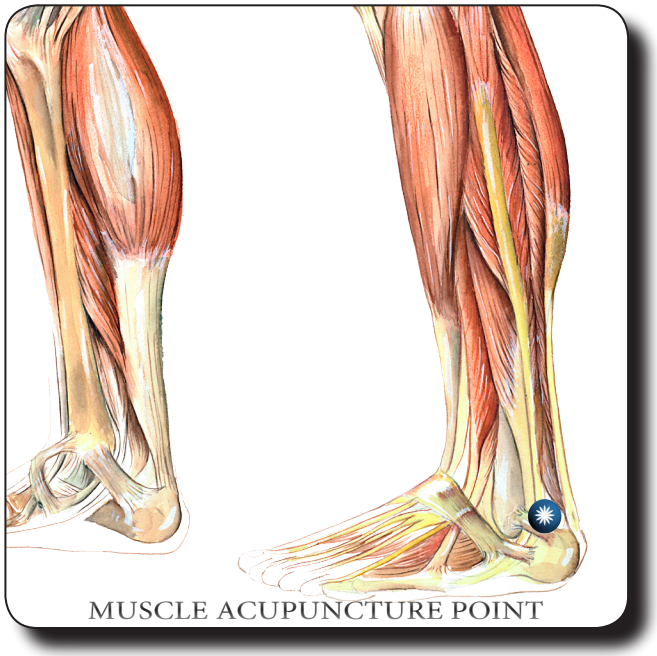

SUPRASPINATUS, (Fossa Division)


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 422: SUPRASPINATUS, (Fossa Division)

ORIGIN: Medial 2/3 of Supraspinatus Fossa of scapula.

INSERTION: Superior facet of greater tuberosity of humerus and capsule of shoulder joint.

ACTION: Abducts arm first 20 - 45 degrees.

TEST:

Patient: Supine. Abduct arm on shoulder 45 degrees. Hand in neutral position.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Distal aspect of forearm to adduct through coronal plane.

NEUROVASCULAR: (Ant/BL) On clavicle, 1/2 to 1" lateral to costosternal junction.

NEUROLYMPHATIC: (Ant/R) Ribcage-sternum, level with Cv18, just above nipple line.

VISCERAL ORGAN:

I. *Anterior Pituitary*: (Post/BL) Calf, posterior aspect, B55.5, midline of upper calf.

II. *Esophagus*: (Ant/BL) Ribcage, just lateral to tip of Xiphoid.

M. A. P. : B60.25

V.L. : T8R

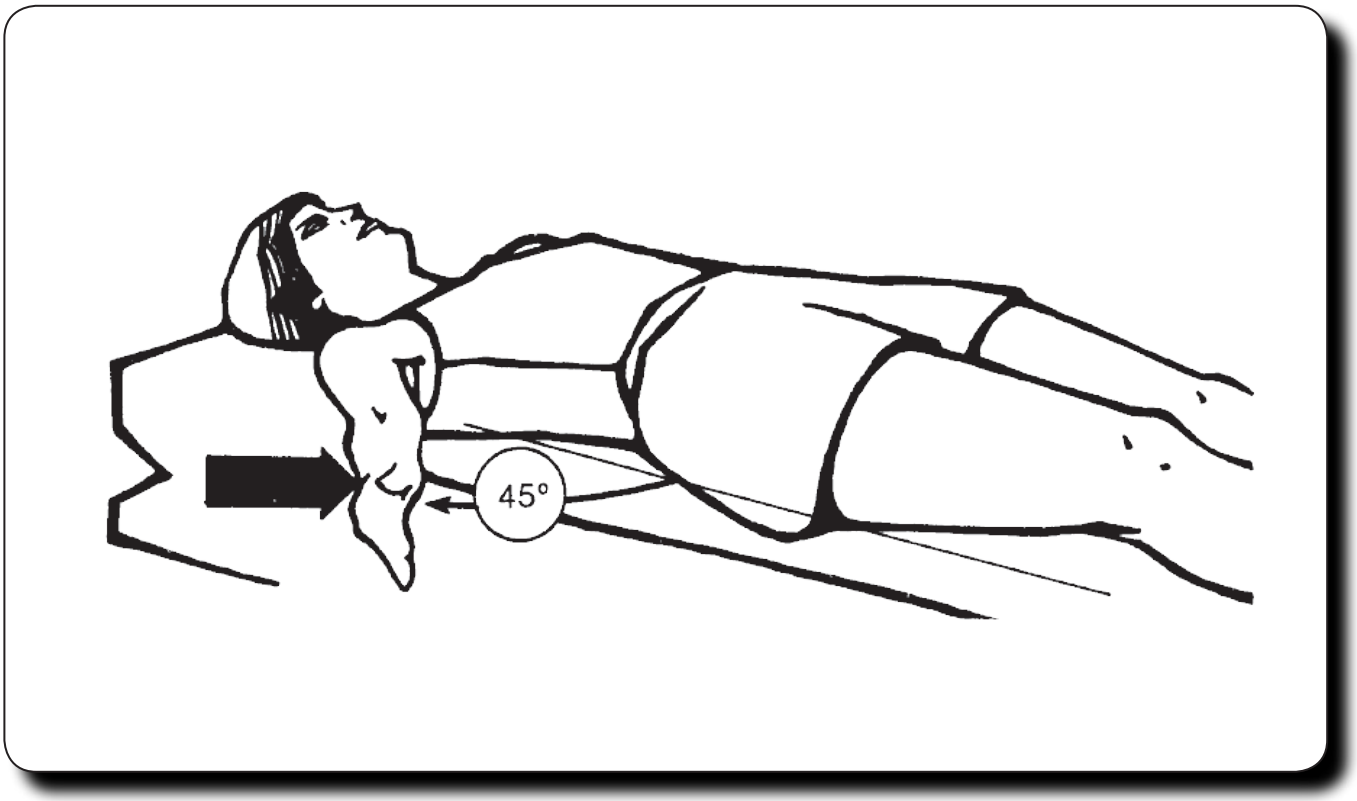
L. B. V.L. : T3R

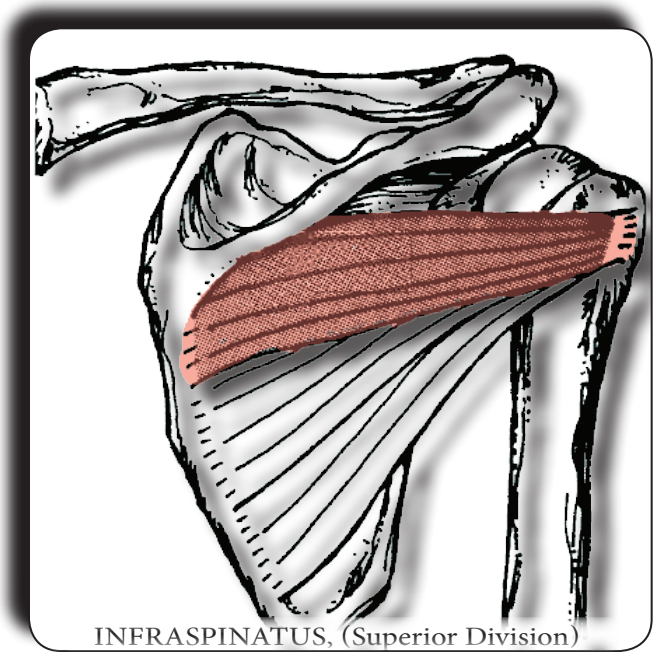
M. M. : C5

CRANIAL: Ethmoid

FOOT: 1st Cuneiform

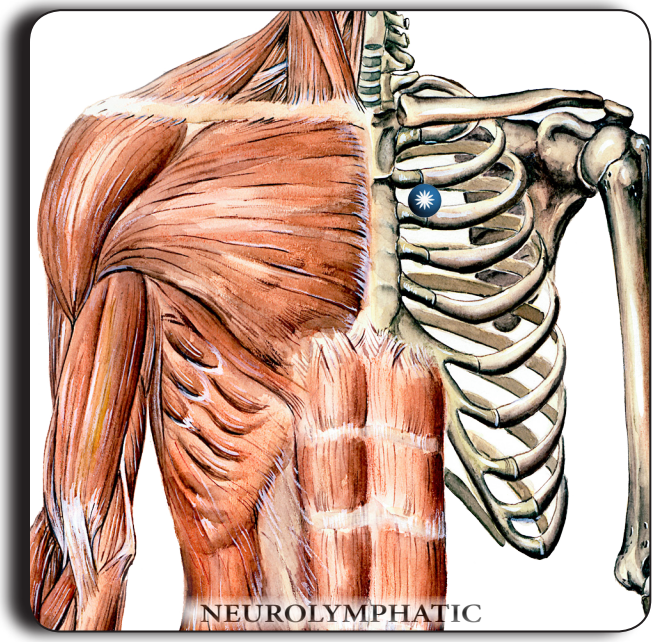
NUTRIENT SOURCE:
1. Zymex II (S)
2. Myotrophin (S)
3. Thymus (S)



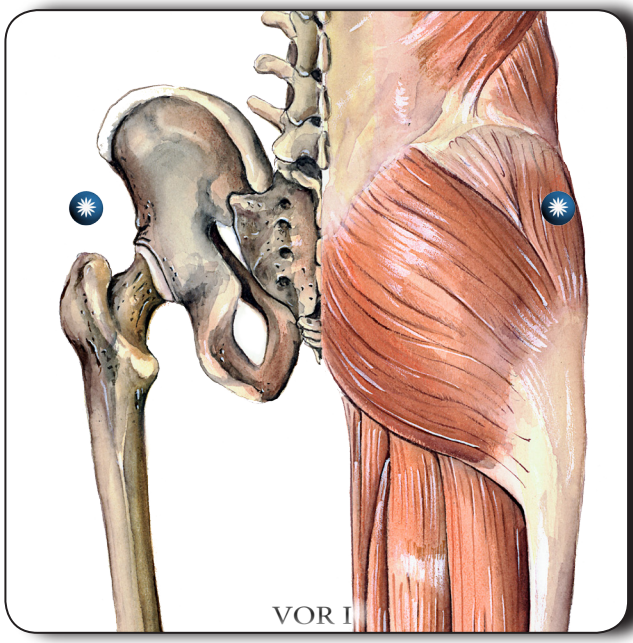


INFRASPINATUS, (Superior Division)

NEUROVASCULAR

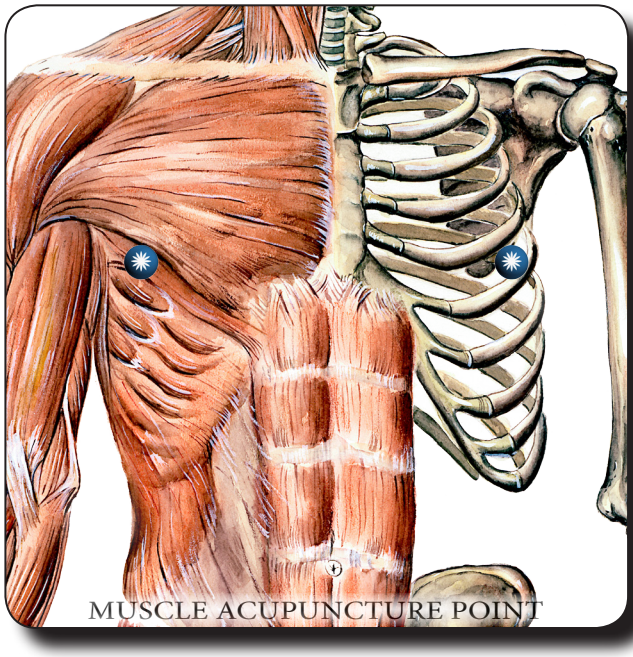


NEUROLYMPHATIC



VOR I

VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 424: INFRASPINATUS, (Superior Division)

ORIGIN: Upper third of infraspinatous fossa of scapula.

INSERTION: The greater tuberosity of the humerus.

ACTION: Externally rotates the arm on shoulder.

TEST:

Patient: Supine. Flex elbow 90 degrees, abduct arm 90 degrees and externally rotate 45 degrees arm on shoulder

Doctor: Position: Ipsilateral.
Brace: Distal medial surface of humerus.
Contact: Distal dorsal surface of forearm to internally rotate arm on shoulder.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, superior to supraorbital ridge.

NEUROLYMPHATIC: (Ant/L) 2nd ICS, 1" lateral to sternum.

VISCERAL ORGAN:

I. *Thyroid:* (Post/BL) Pelvis, posterior lateral aspect, 3" inferior to crest of ilium in belly of Gluteus Medius antention division.

II. *Lungs - Lymphatics:* (Ant/BL) Maxillary bone, lateral and superior to Gv26, under nasal aperture.

M. A. P. : Cx1

V.L. : C5R

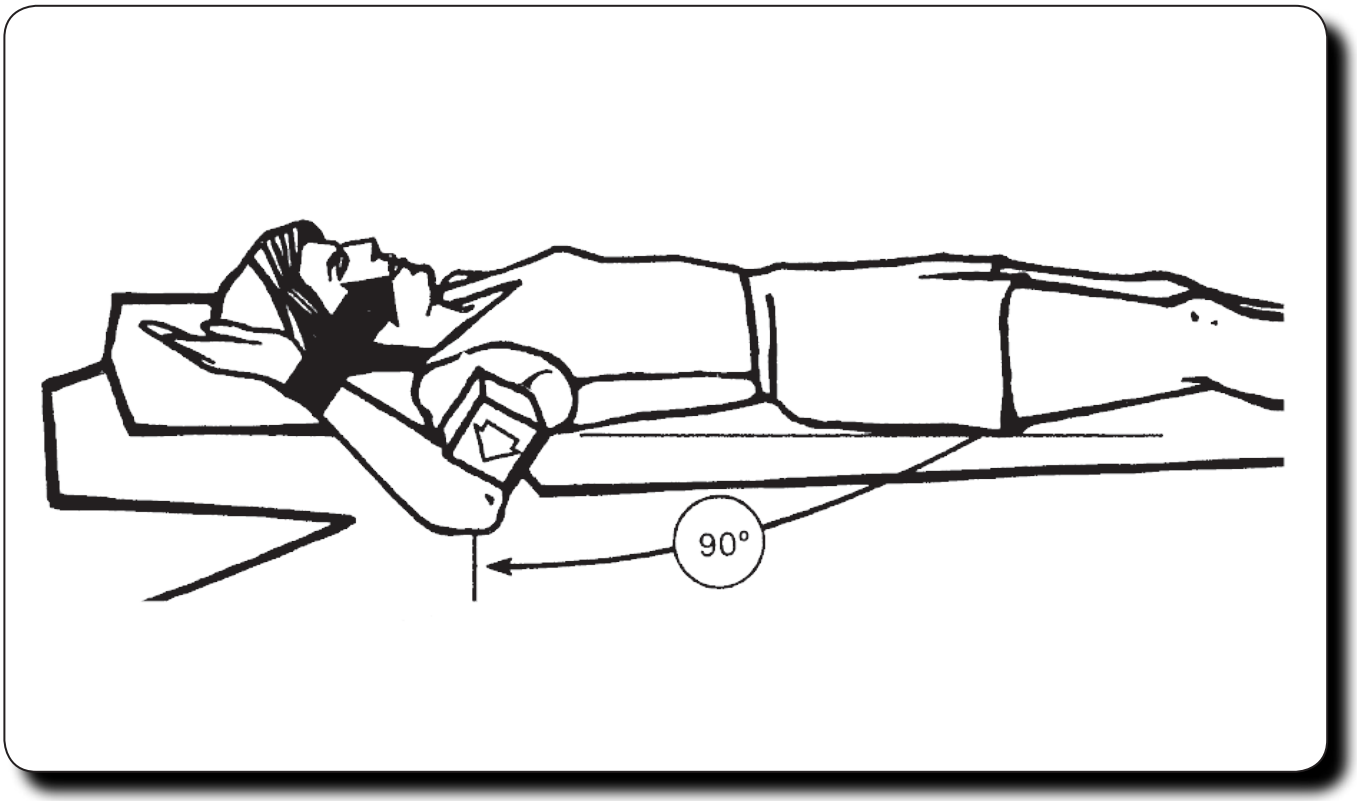
L. B. V.L. : L1R

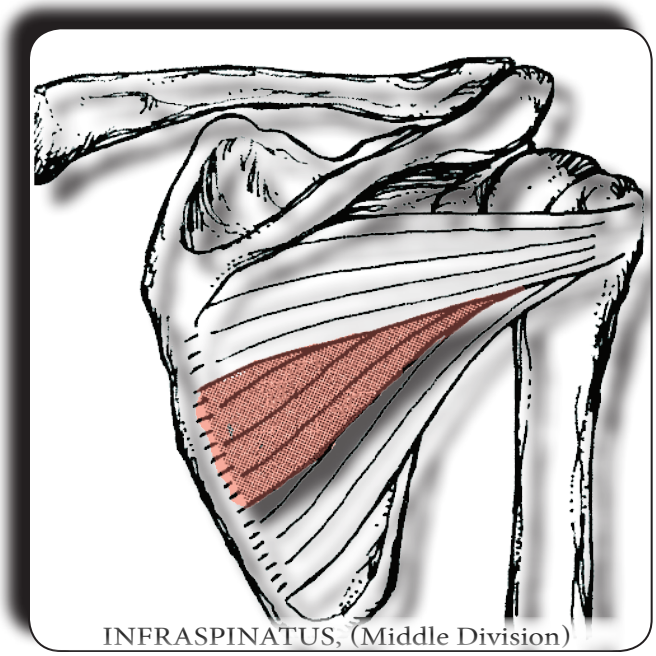
M. M. : C6

CRANIAL: Nasal

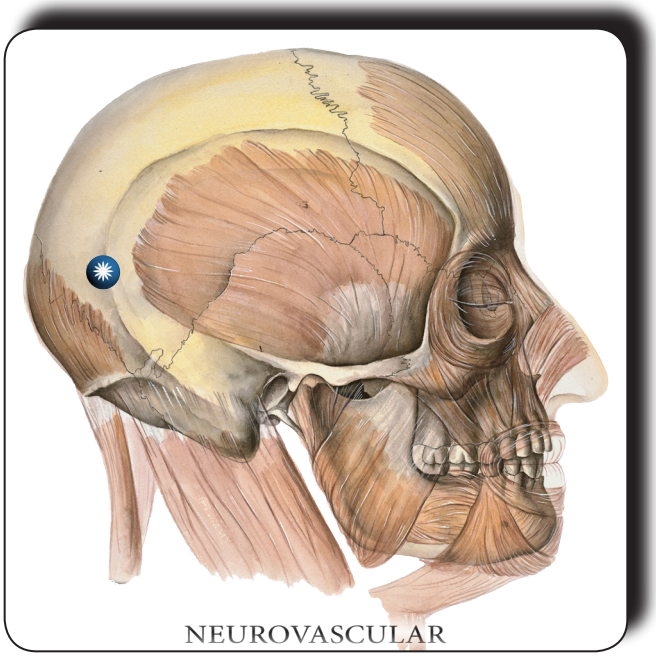
FOOT: 2nd phalanx of great toe

NUTRIENT SOURCE:
1. Nyotrophin (S)

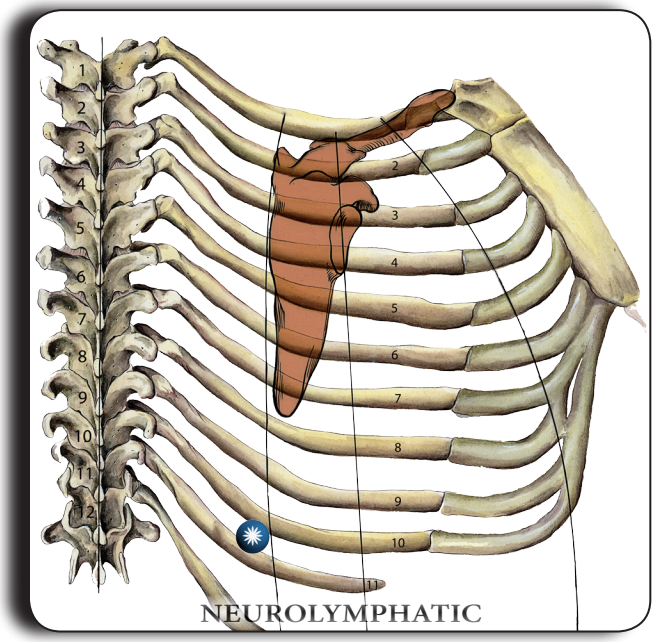




INFRASPINATUS, (Middle Division)



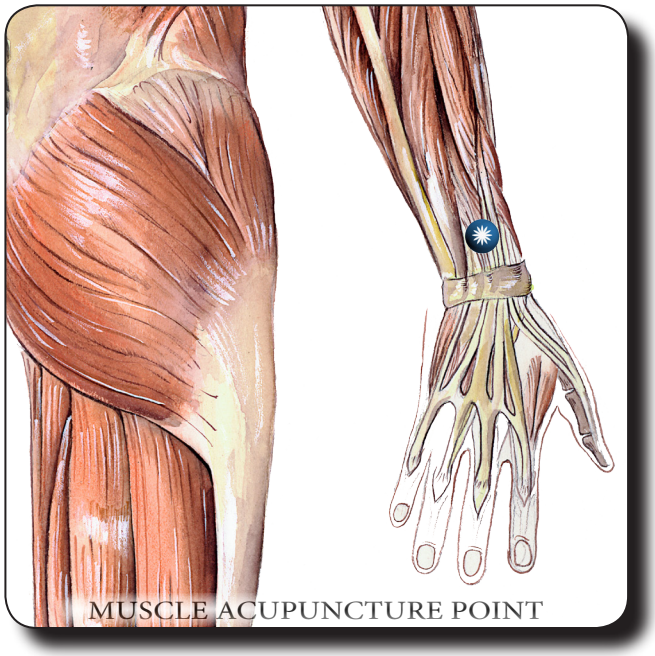
NEUROVASCULAR



NEUROLYMPHATIC

VOR I

VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 426: INFRASPINATUS, (Middle Division)

ORIGIN: Middle third of infraspinatous fossa of scapula.

INSERTION: The greater tuberosity of the humerus.

ACTION: Externally rotates the arm on shoulder.

TEST:

Patient: Supine. Flex elbow 90 degrees, abduct arm 45 degrees and externally rotate arm on shoulder 45 degrees

Doctor: Position: Ipsilateral.
Brace: Distal medial aspect of humerus.
Contact: Distal dorsal surface of forearm to internally rotate arm on shoulder.

NEUROVASCULAR: (Lat) Parietal bone, posterior superior aspect near Lambdoidal suture.

NEUROLYMPHATIC: (Post/R) 10th ICS, 6" lateral to spine.

VISCERAL ORGAN:

I. *Eye:* (Ant/BL) Frontal bone, anterior inferior aspect, medial corner of eye, B1.

II. *Gallbladder:* (Ant/R) Rectus Abdominis, 3rd section, 1 and 1/2" lateral to midline, just inferior to insertion.

M. A. P. : Tw5

V.L. : T4L

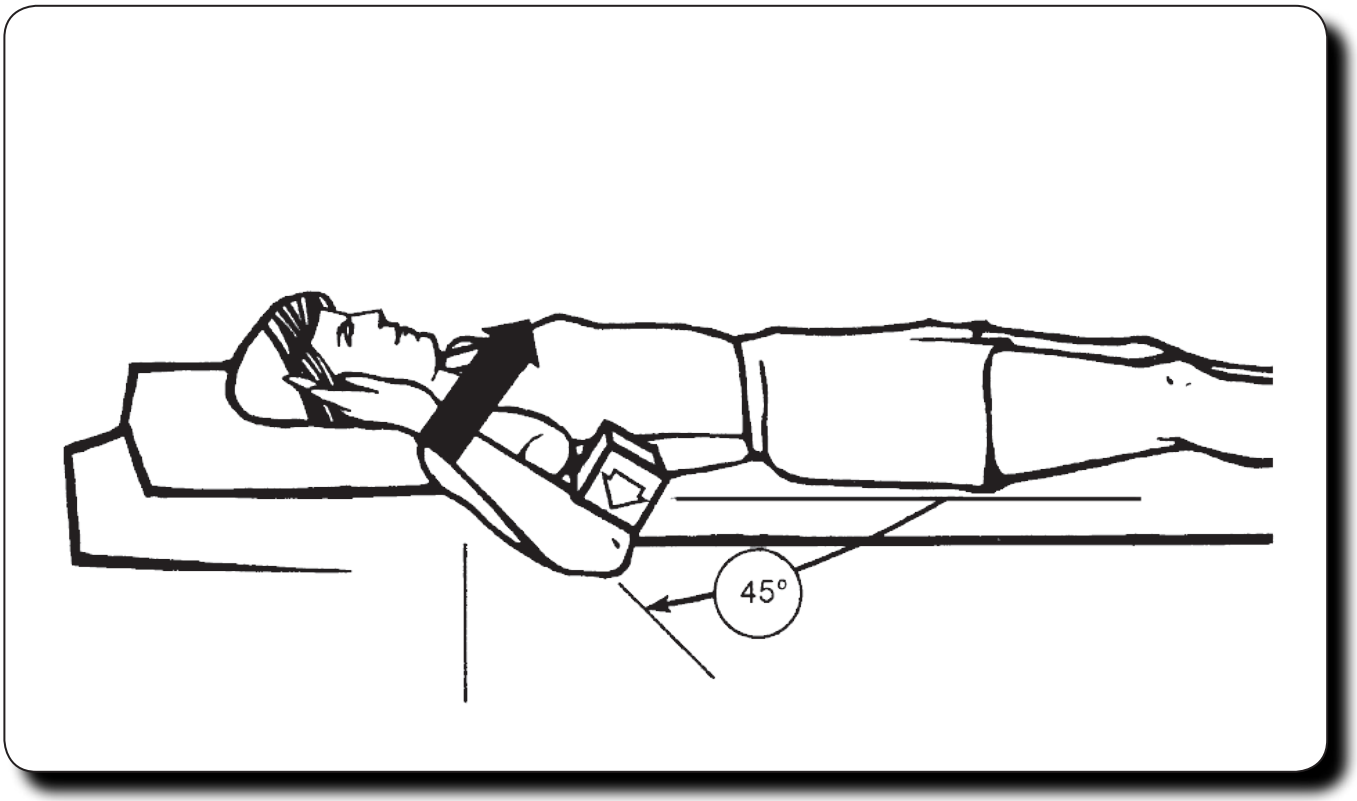
L. B. V.L. : T7L

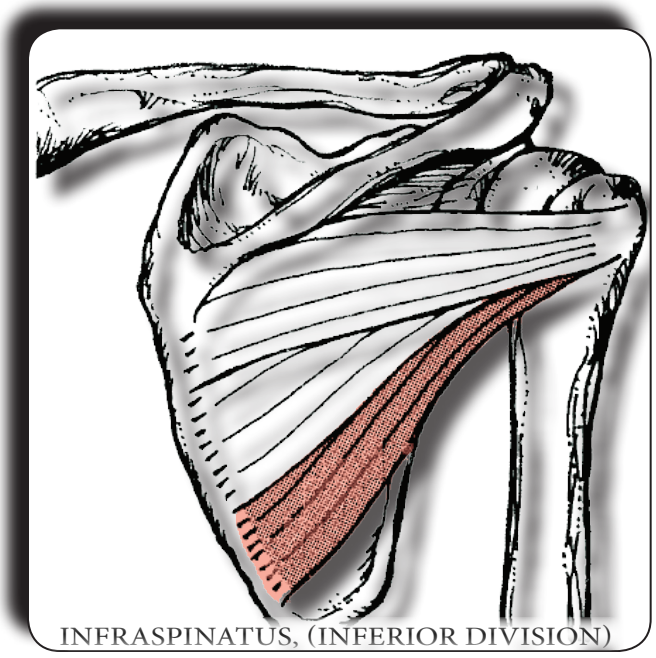
M. M. : C6

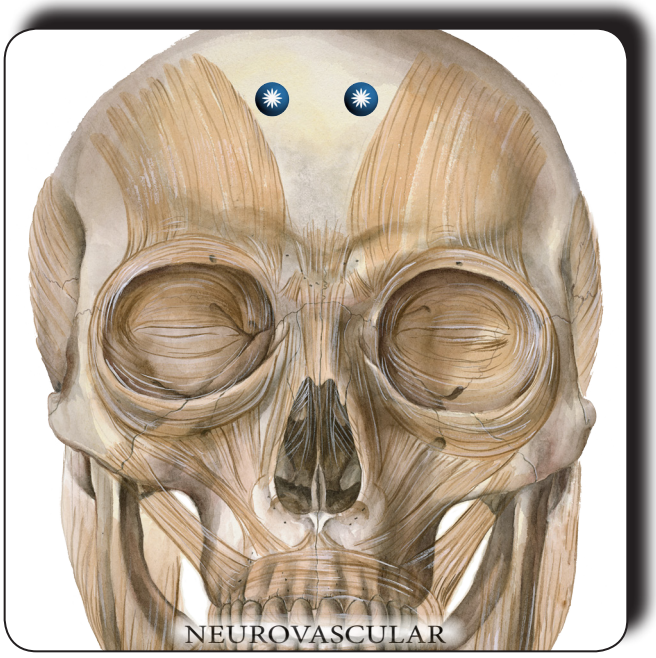
CRANIAL: Sphenoid

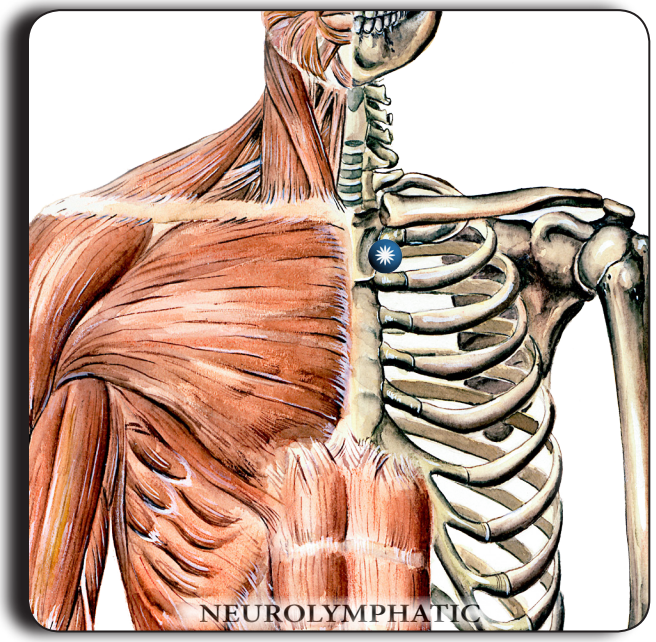
FOOT: 3rd Cuneiform

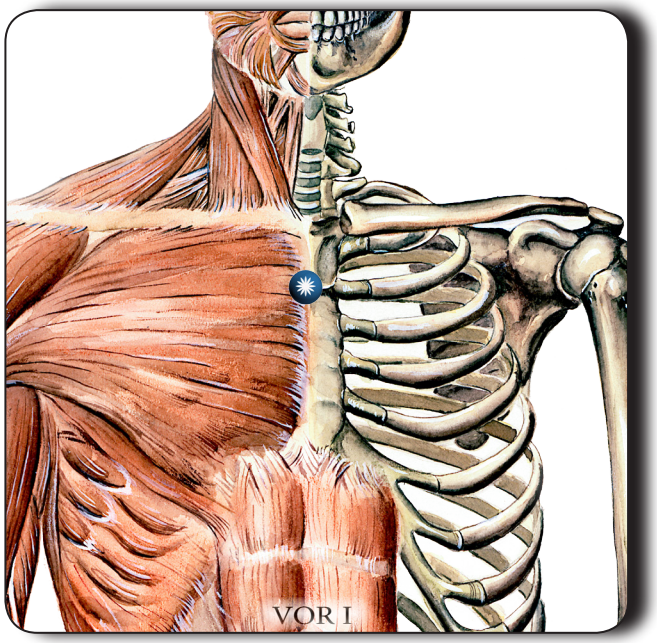
NUTRIENT SOURCE:
1. Complex E-2 (S)

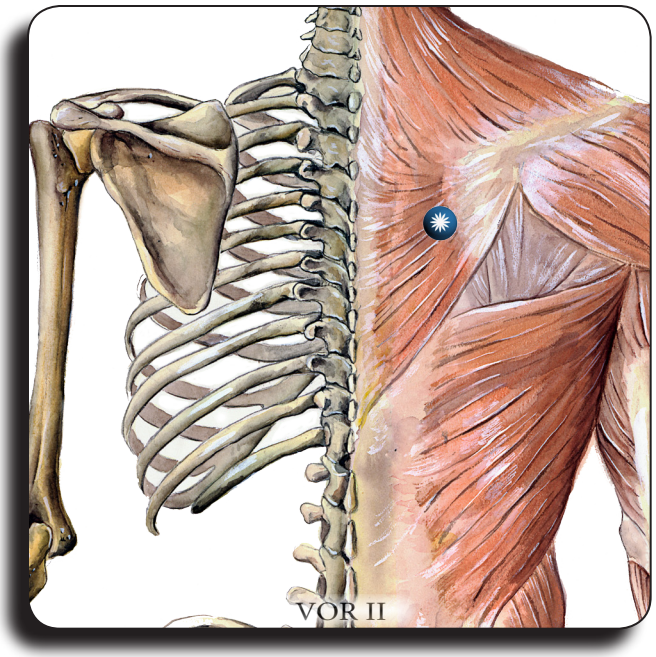


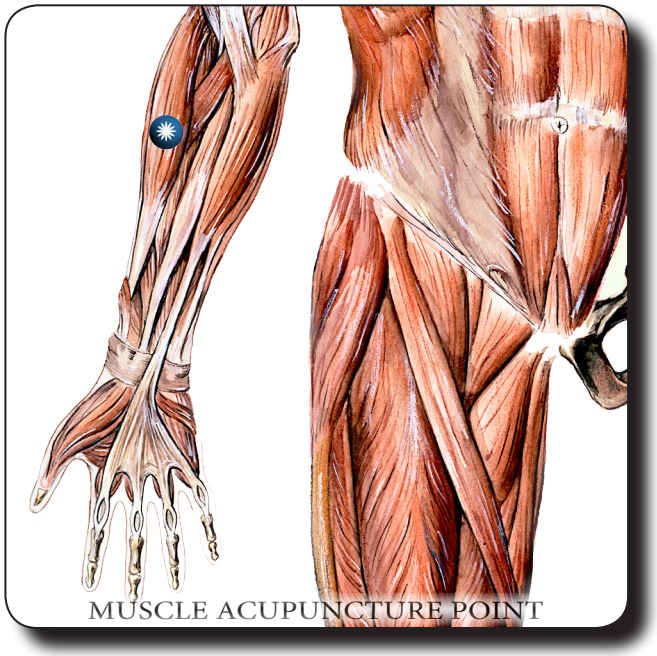

INFRASPINATUS, (INFERIOR DIVISION)


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 428: INFRASPINATUS, (Inferior Division)

ORIGIN: Lower third of infraspinatous fossa of scapula.

INSERTION: The greater tuberosity of the humerus.

ACTION: Externally rotates the arm on shoulder.

TEST:

Patient: Supine. Flex elbow 90 degrees, abduct arm 23 degrees and externally rotate arm on shoulder 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Distal medial aspect of humerus.
Contact: Distal dorsal surface of forearm to internally rotate arm on shoulder.

NEUROVASCULAR: (Ant/BL) Frontal bone at hairline, 1" lateral to midline.

NEUROLYMPHATIC: (Ant/L) 1st ICS at the sternum.

VISCERAL ORGAN:

I. *Thymus:* (Ant/Midline) Sternum, anterior superior aspect, Cv20 (angle of Louis).

II. *Gallbladder Duct System - common bile duct:* (Post/R) Rib cage, posterior aspect, 5th ICS at B38.

M. A. P. : Lu6

V.L. : L1R

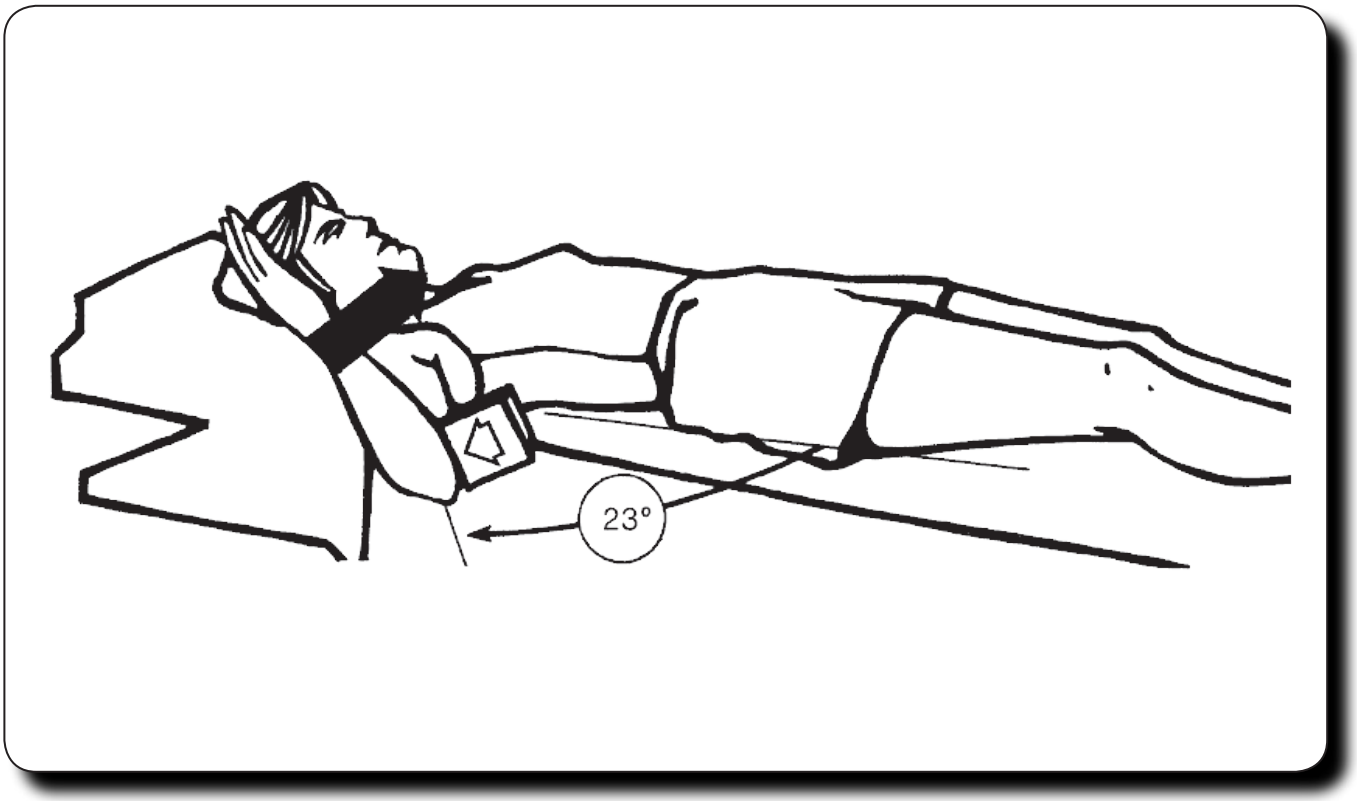
L. B. V.L. : C5R

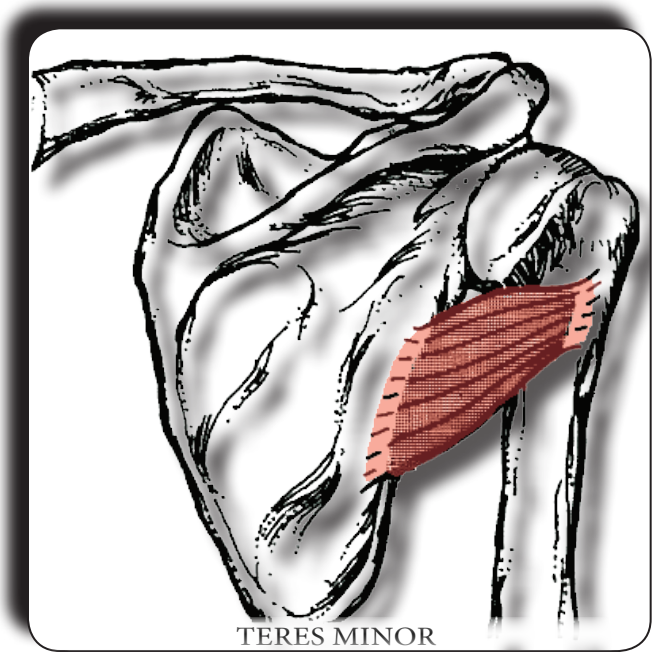
M. M. : C6

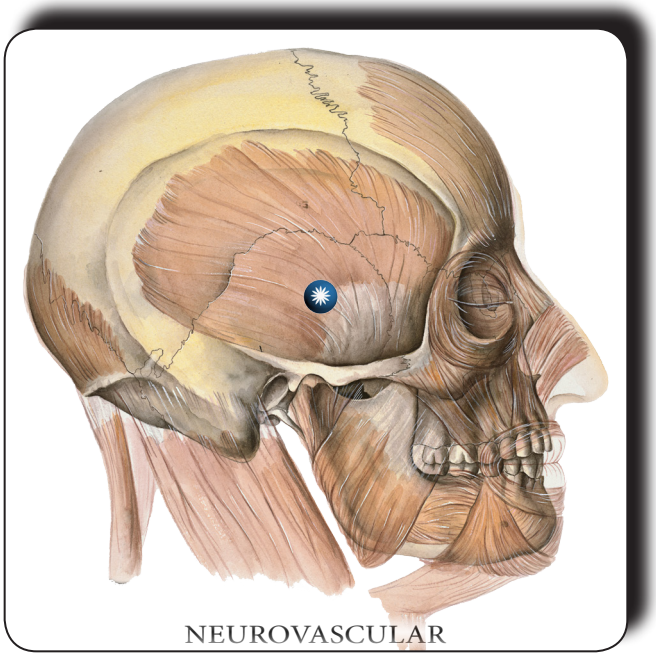
CRANIAL: Frontal

FOOT: Navicular

NUTRIENT SOURCE:
1. Zypan (S)




TERES MINOR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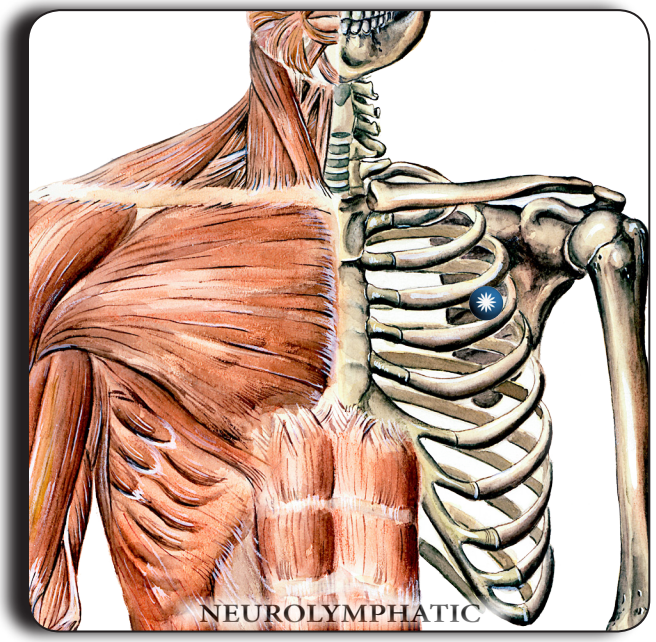
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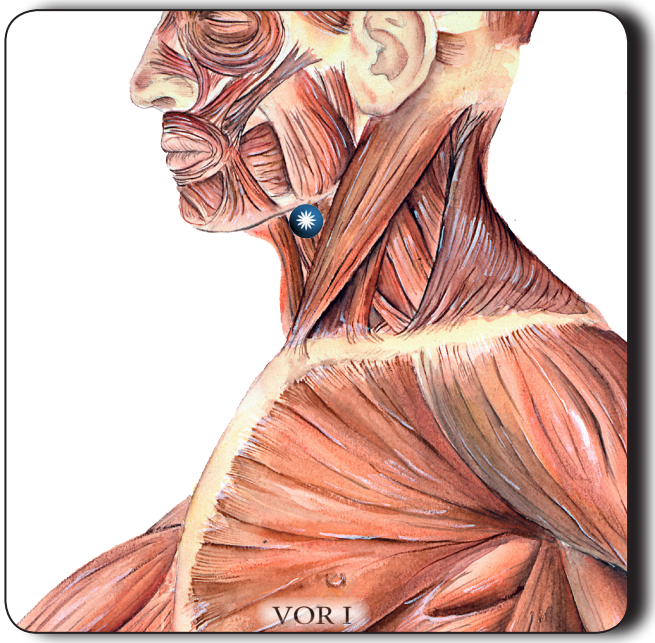
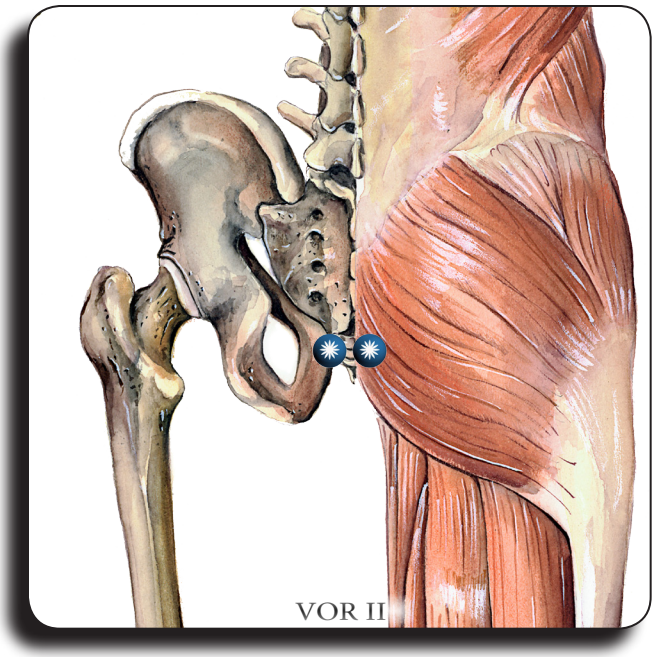
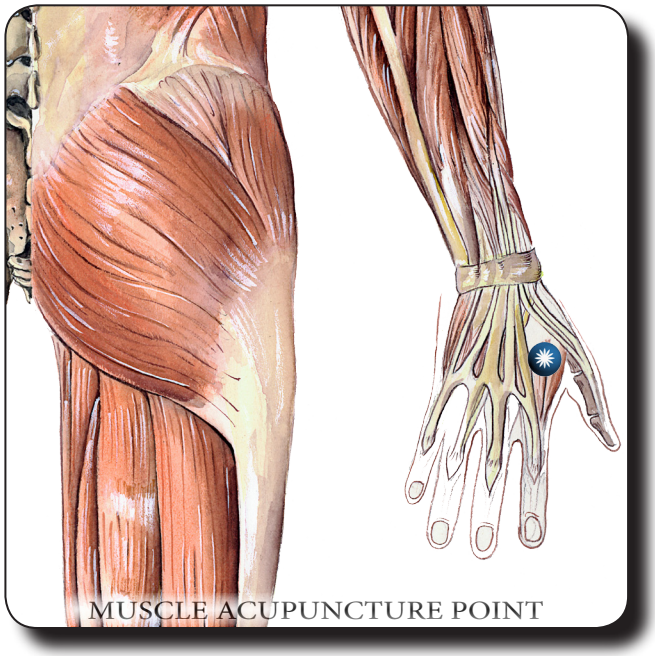

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 430: TERES MINOR

ORIGIN: Upper two thirds of posterior surface of the axillary border of scapula.

INSERTION: Inferior aspect of greater tuberosity of humerus and capsule of the shoulder joint.

ACTION: Rotates the arm laterally and adducts it.

TEST:

Patient: Supine. With elbow flexed 90 degrees, adduct arm to side and externally rotate 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Distal medial aspect of humerus.
Contact: Distal dorsal surface of forearm to internally rotate arm on shoulder.

NEUROVASCULAR: (Lat) Temporal bone, squamosal section, 2" superior and 1" anterior to EAC.

NEUROLYMPHATIC: (Ant/L) 3rd ICS, just lateral to nipple.

VISCERAL ORGAN:

I. *Thyroid:* (Lat/BL) Neck, anterior aspect, medial and superior to SCM at St9.8.

II. *Gonads:* (Post/BL) Pelvis, posterior aspect, lateral aspect of Coccyx at B35.

M. A. P. : Li4

V.L. : T3R

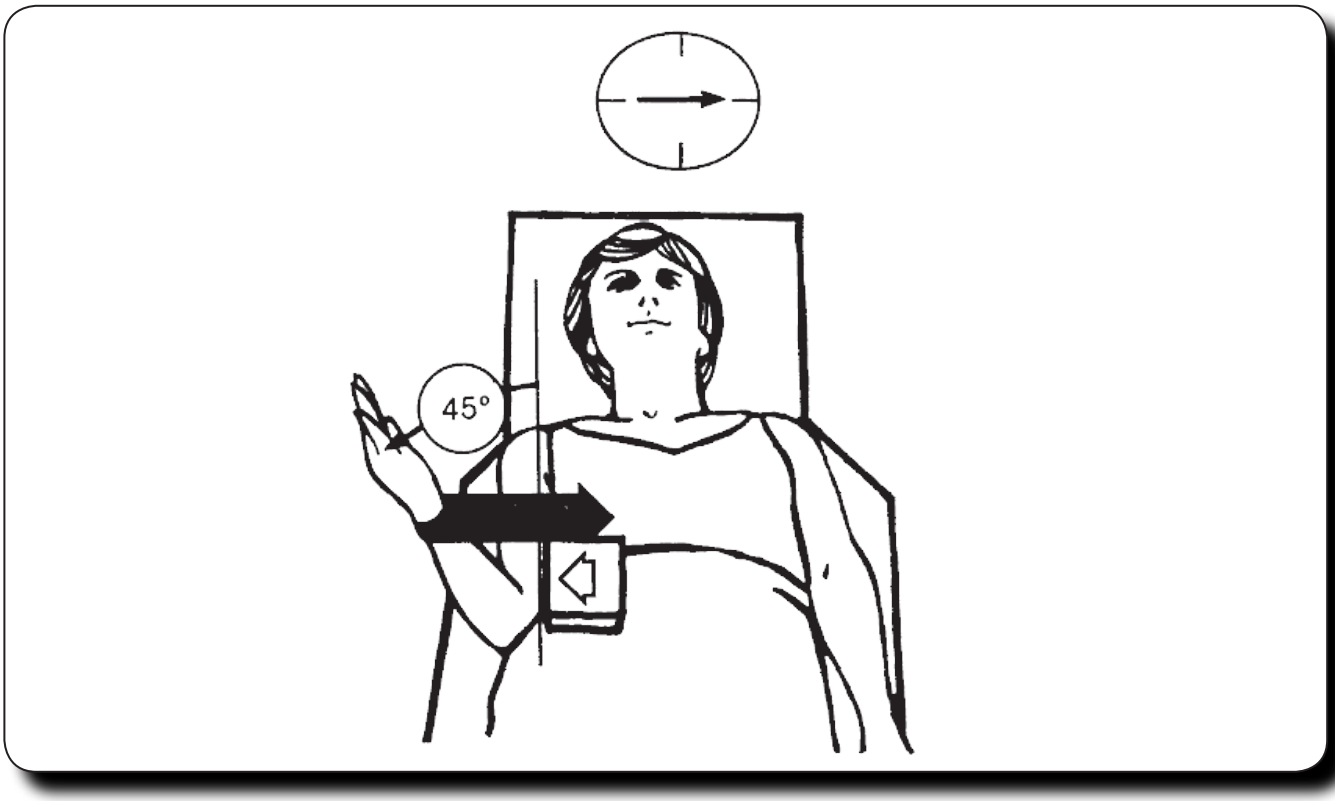
L. B. V.L. : T8R

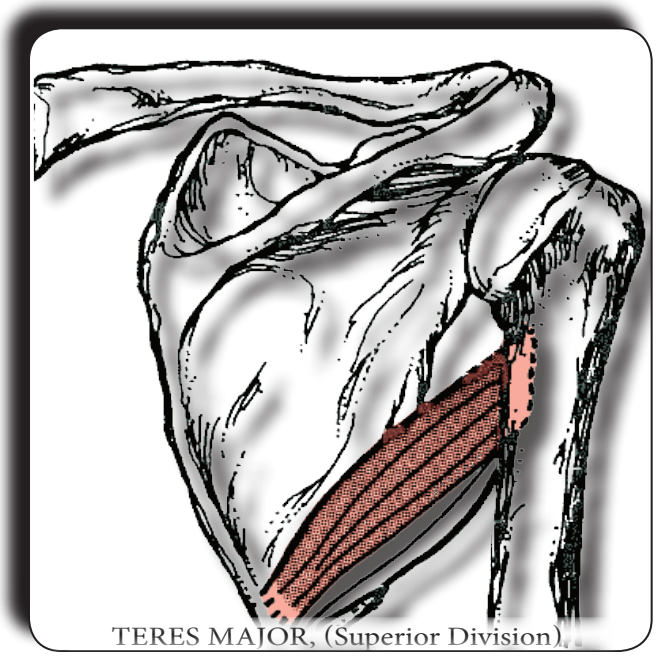
M. M. : C6

CRANIAL: Inferior Conchae

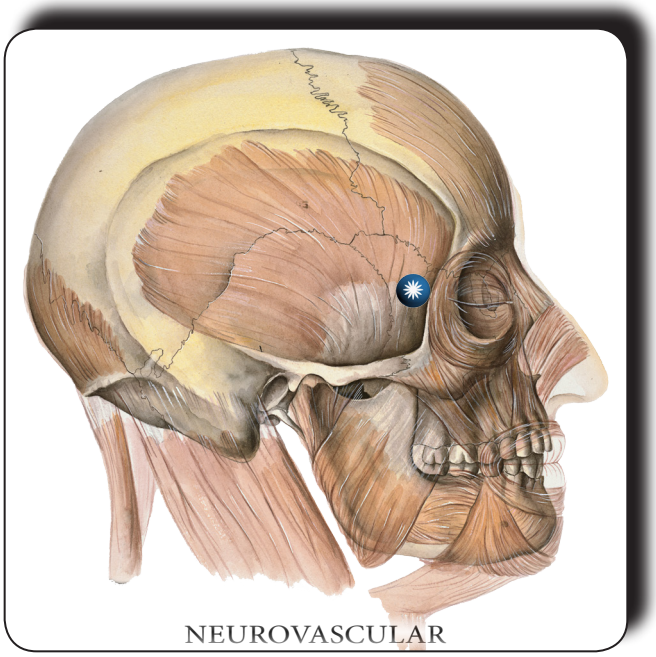
FOOT: 1st phalanx, 2nd toe

NUTRIENT SOURCE:
1. Organic Iodine (S)





TERES MAJOR, (Superior Division)



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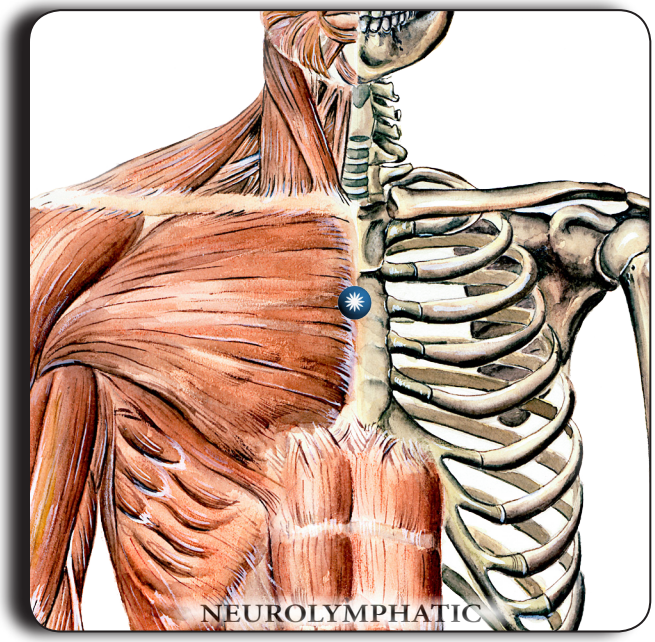

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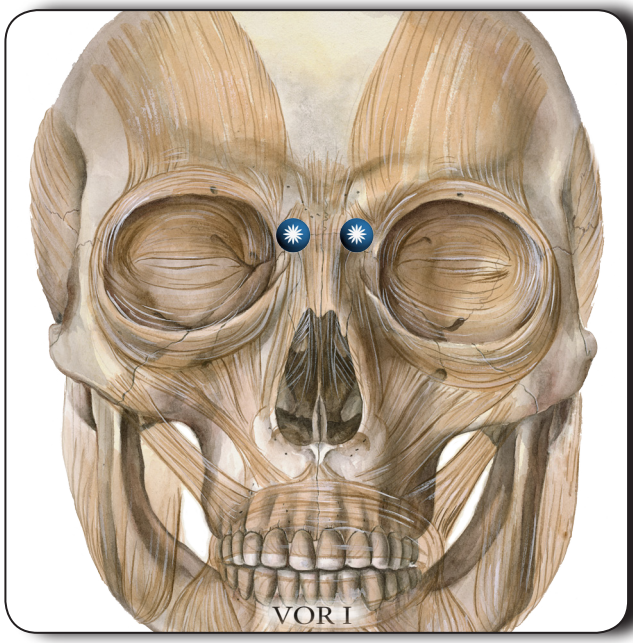
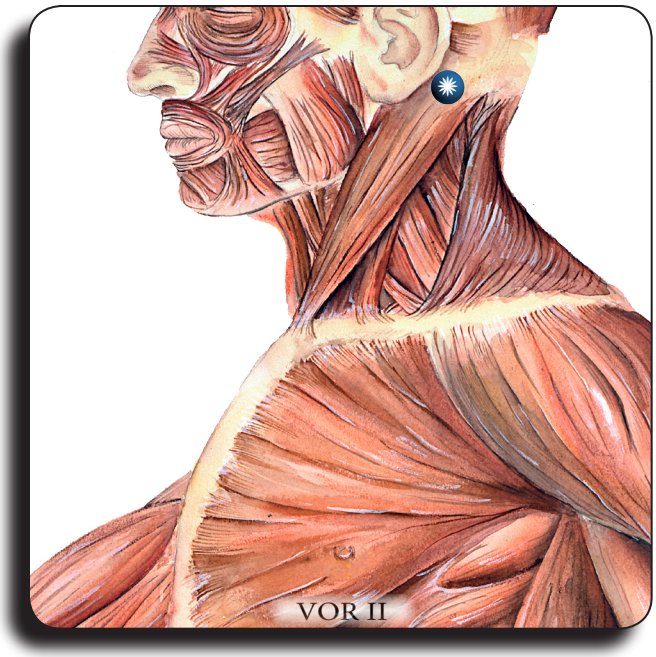
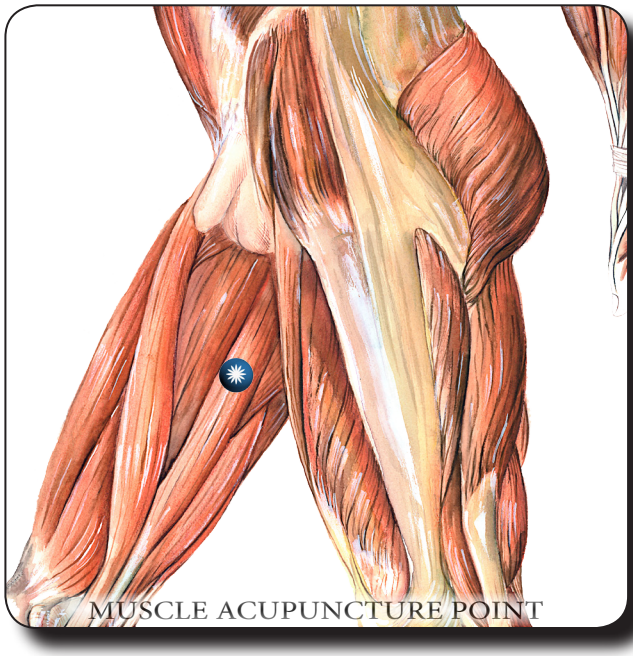


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 432: TERES MAJOR, (Superior Division)

ORIGIN: Dorsal surface of inferior and lower third of axillary border of scapula.

INSERTION: Medial lip of bicipital groove of humerus.

ACTION: Adducts, extends and rotates arm medially.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Abduct and internally rotate arm on shoulder. Place dorsum surface of hand on posterior inferior aspect of Rib cage. Then extend arm on shoulder 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Elbow of arm on dorsal surface to flex and abduct arm on shoulder.

NEUROVASCULAR: (Lat) Sphenoid bone, at level of middle of eyes.

NEUROLYMPHATIC: (Ant/Midline) sternum at level of 3rd rib, Cv19.5.

VISCERAL ORGAN:

I. *Pineal:* (Lat/BL) Frontal bone, anterior aspect, B1 medial aspect of eye.

II. *External ear:* (Post/BL) Temporal bone, posterior aspect, mastoid portion, G12.

M. A. P. : K10.5

V.L. : L3R

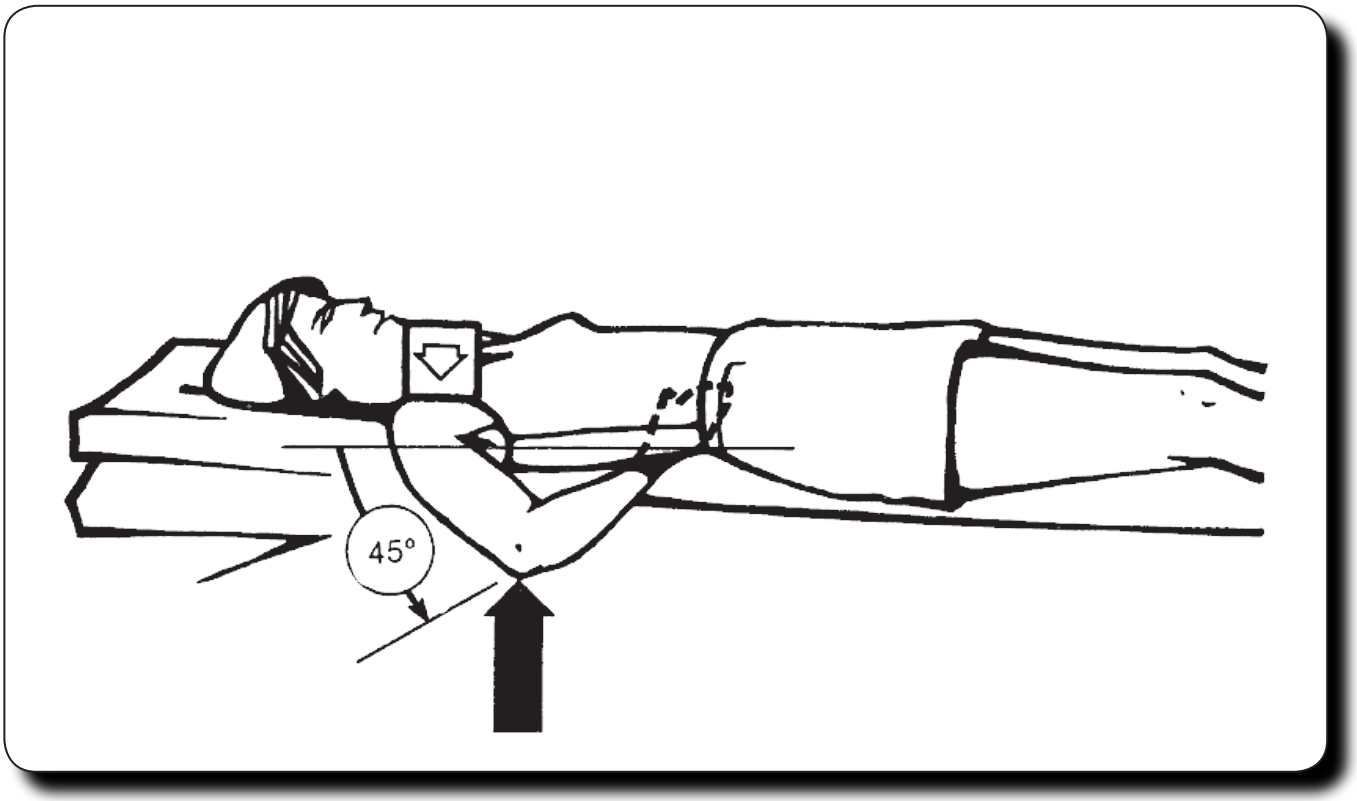
L. B. V.L. : C3R

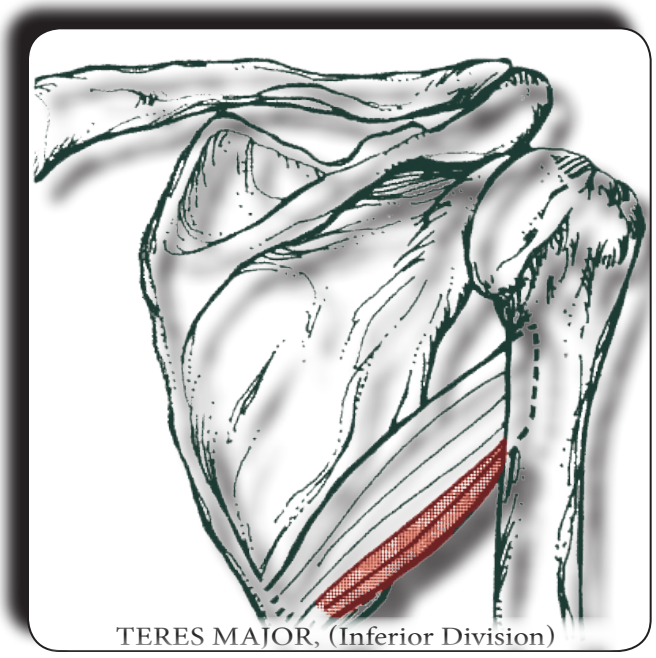
M. M. : C7

CRANIAL: Occiput

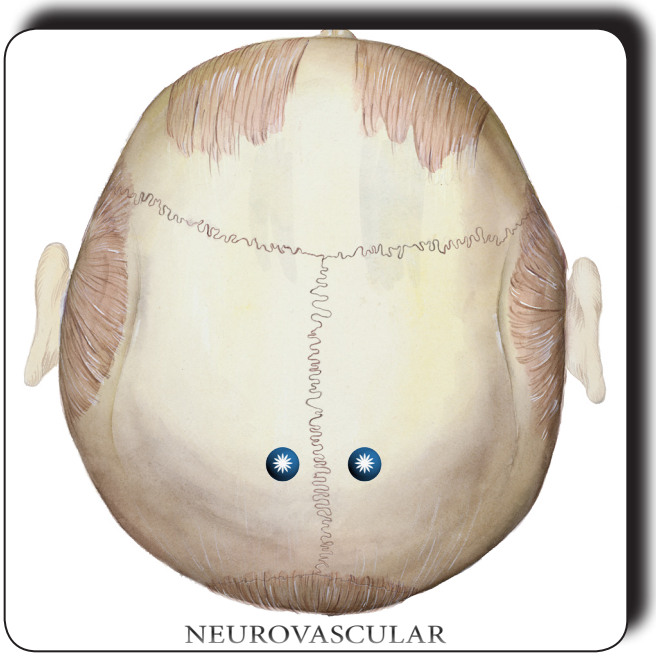
FOOT: Calcaneus

NUTRIENT SOURCE:
1. Chelated Minerals (Carlson)
2. Allorganic Trace Minerals (S)





TERES MAJOR, (Inferior Division)



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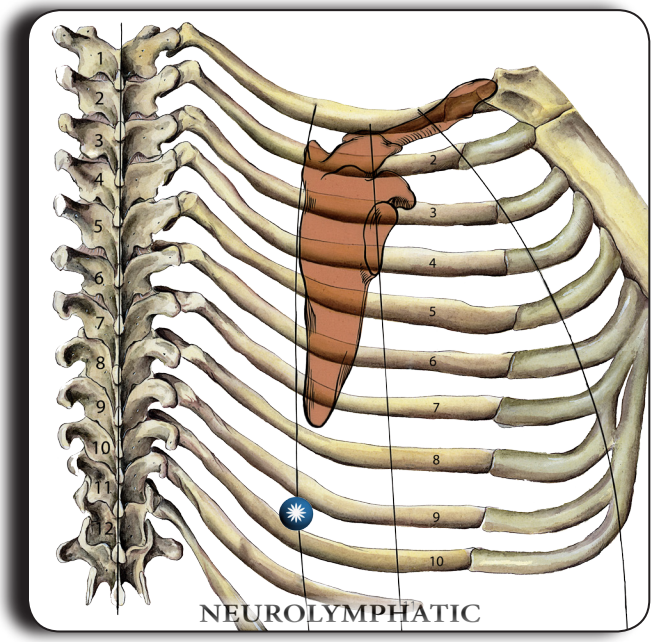

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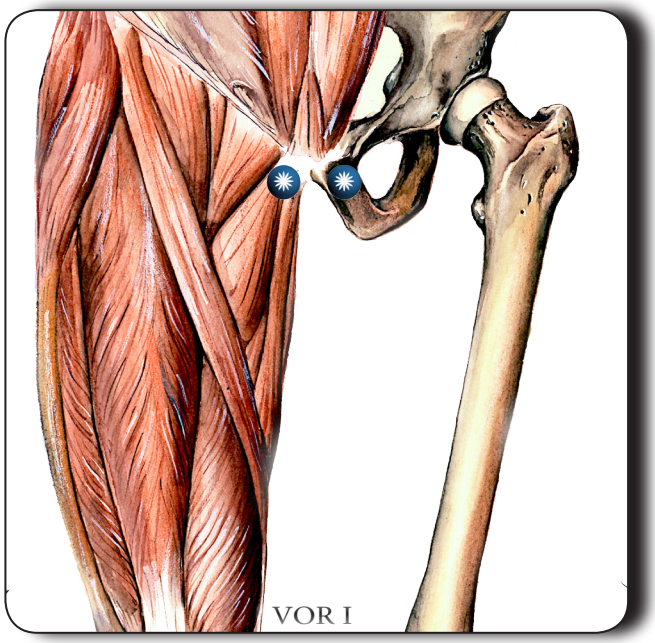
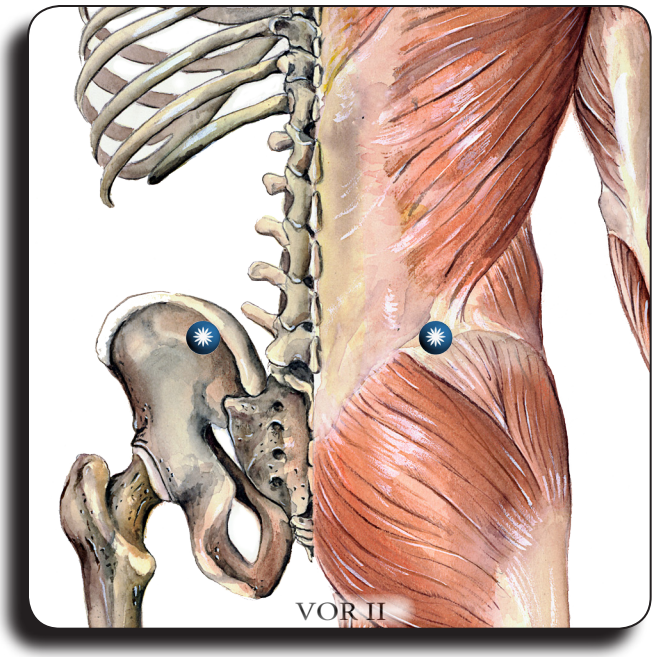
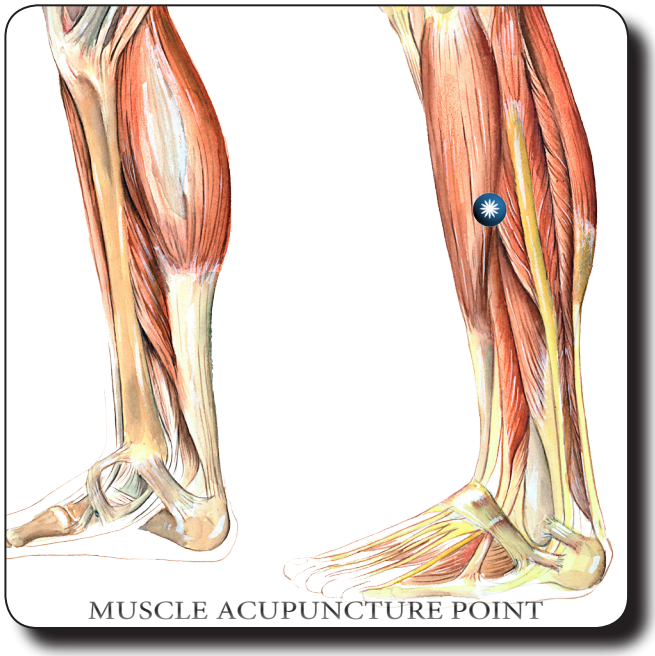


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 434: TERES MAJOR, (Inferior Division)

ORIGIN: Fibrous septa imposed between muscle, Teres Minor, and Infraspinatus.

INSERTION: Crest of the lesser tubercle (lower fibers) of humerus.

ACTION: Adducts, extends and rotates arm medially.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Abduct and internally rotate arm on shoulder. Place dorsum surface of hand on posterior aspect of pelvis. Then extend arm on shoulder 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Elbow of arm on dorsal surface to flex and abduct arm on shoulder.

NEUROVASCULAR: (Sup/BL) Cranium, superior aspect, 1/2" lateral to sagittal suture at midpoint between anterior and posterior fontanelle.

NEUROLYMPHATIC: (Post/R) 9th ICS, at vertebral border of scapula.

VISCERAL ORGAN:

I. *Penis/Vaginal Vault:* (Ant/BL) Pelvis, Pubic area, inferior ramus, 1/2" inferior to cloacal reflex.

II. *Lungs:* (Post/BL) Pelvis, origin Gluteus Medius, near crest of ilium.

M. A. P. : St40

V.L. : T7L

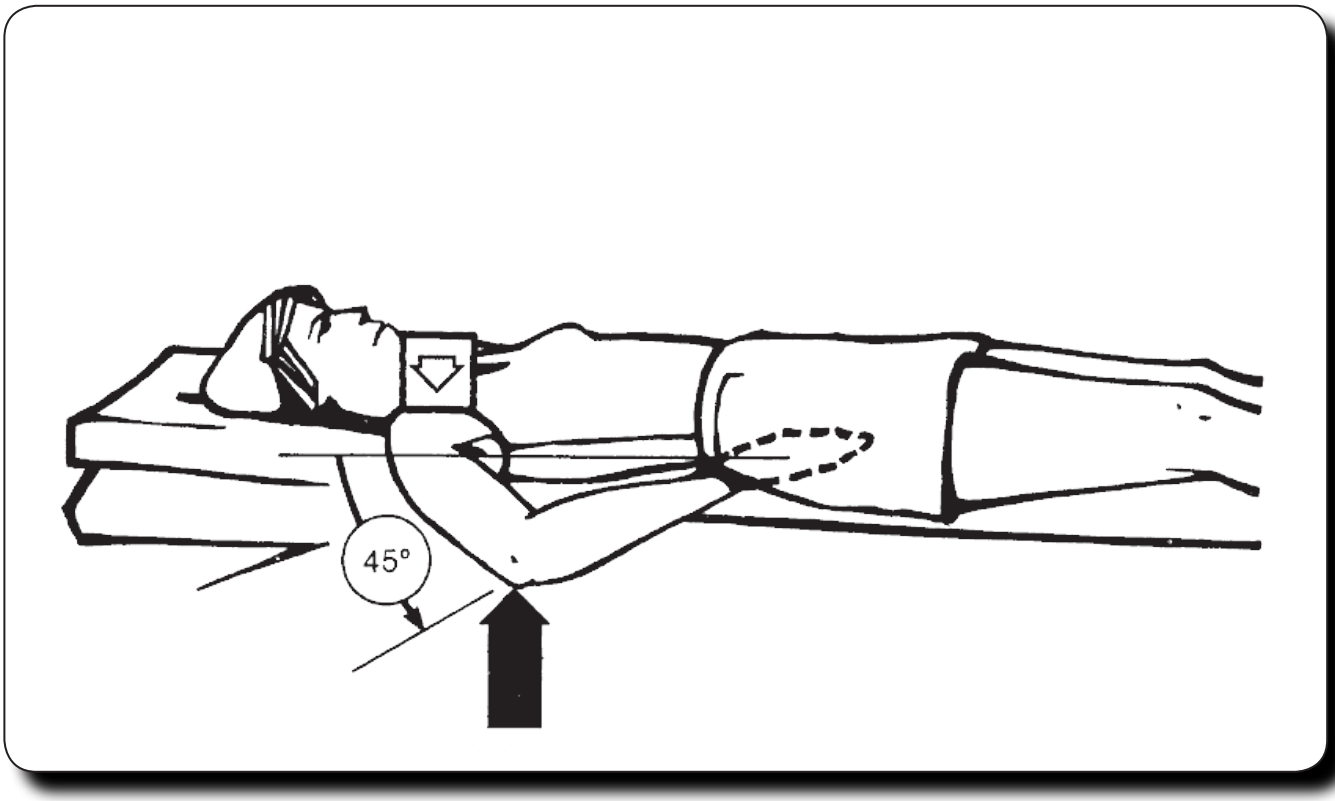
L. B. V.L. : T4L

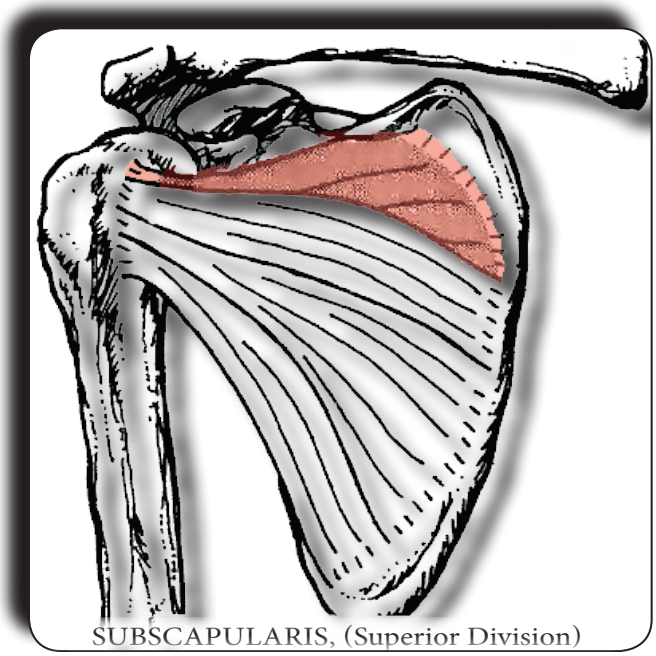
M. M. : C7

CRANIAL: Maxillary

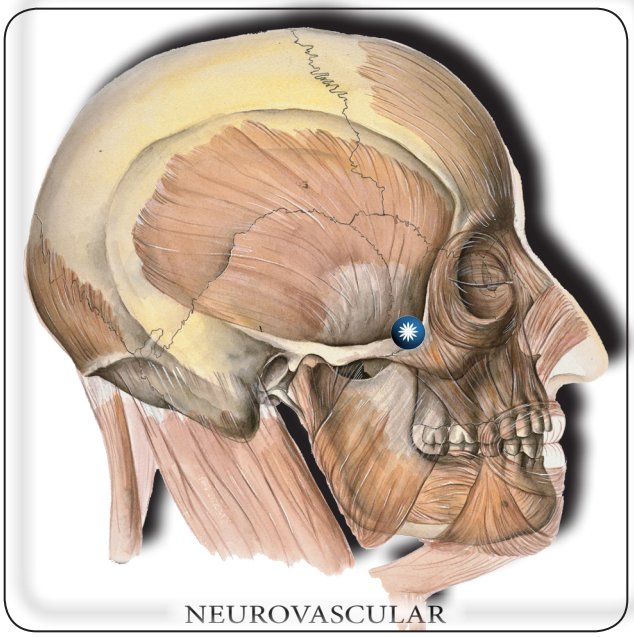
FOOT: 5th Metatarsal

NUTRIENT SOURCE:
l. Betaine Hydrochloride (S)





SUBSCAPULARIS, (Superior Division)



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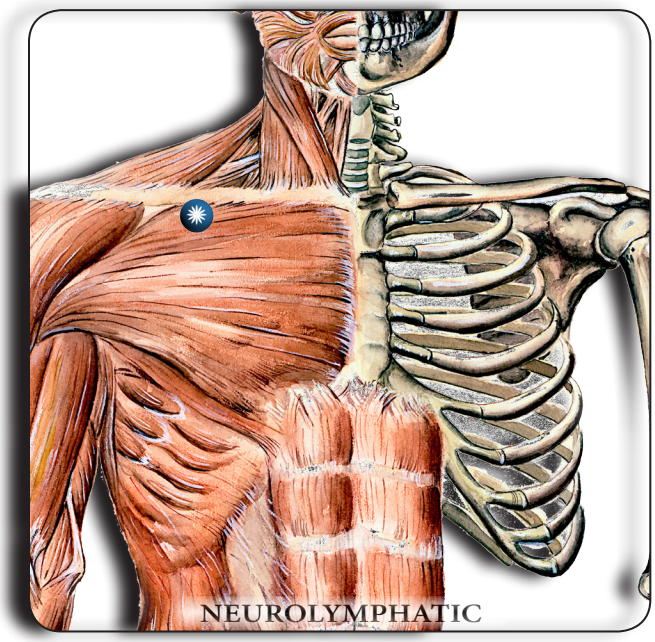

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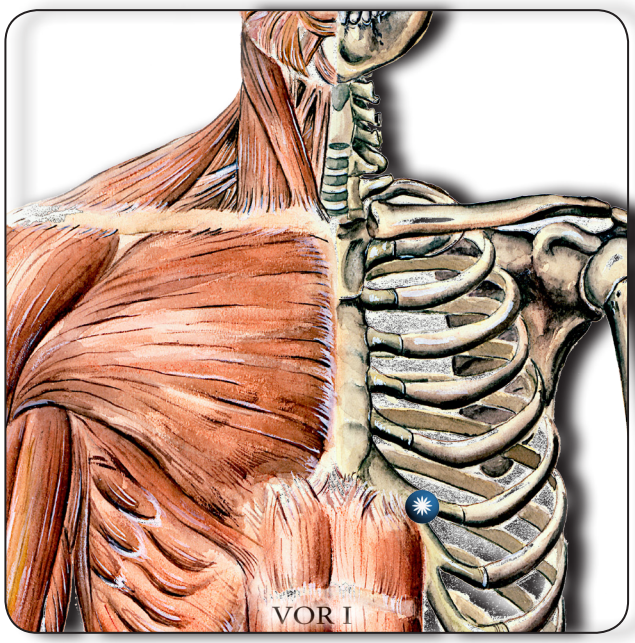
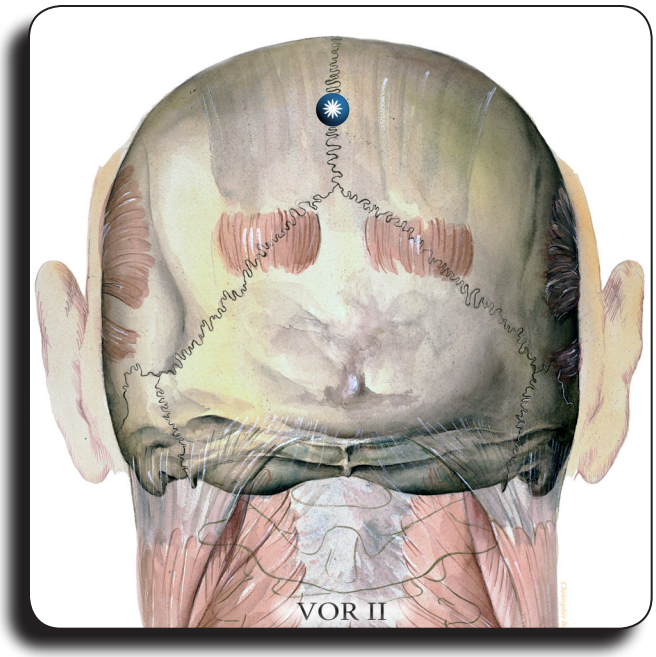
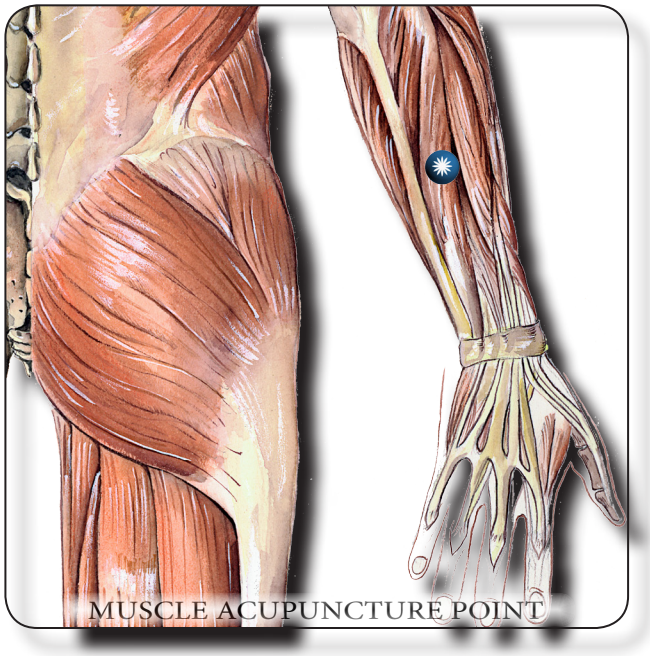


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 436: SUBSCAPULARIS, (Superior Division)

ORIGIN: Subscapular fossa, upper fourth.

INSERTION: Lesser tuberosity of humerus.

ACTION: Rotates arm internally. Draws the humerus toward the glenoid fossa. Assists in flexion, extension, abduction and adduction of the arm on shoulder.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Abduct arm 125 degrees and internally rotate arm until hand is in mid-coronal plane.

Doctor: Position: Ipsilateral at side.
Brace: Distal lateral surface of ipsilateral arm.
Contact: Distal medial surface of forearm to externally rotate arm on shoulder.

NEUROVASCULAR: (Lat) Zygomatic bone, superior surface just anterior to temporal-zygomatic suture.

NEUROLYMPHATIC: (Ant/R) 1st ICS, midclavicular line.

VISCERAL ORGAN:

I. *Heart:* (Ant/L) Ribcage, anterior surface, 6th costocartilage.

II. *Posterior Pituitary:* (Post/Midline) Cranium, sagital suture 1 1/2" anterior to posterior fontanelle, Gv18.

M. A. P. : Tw8.8

V.L. : T4L

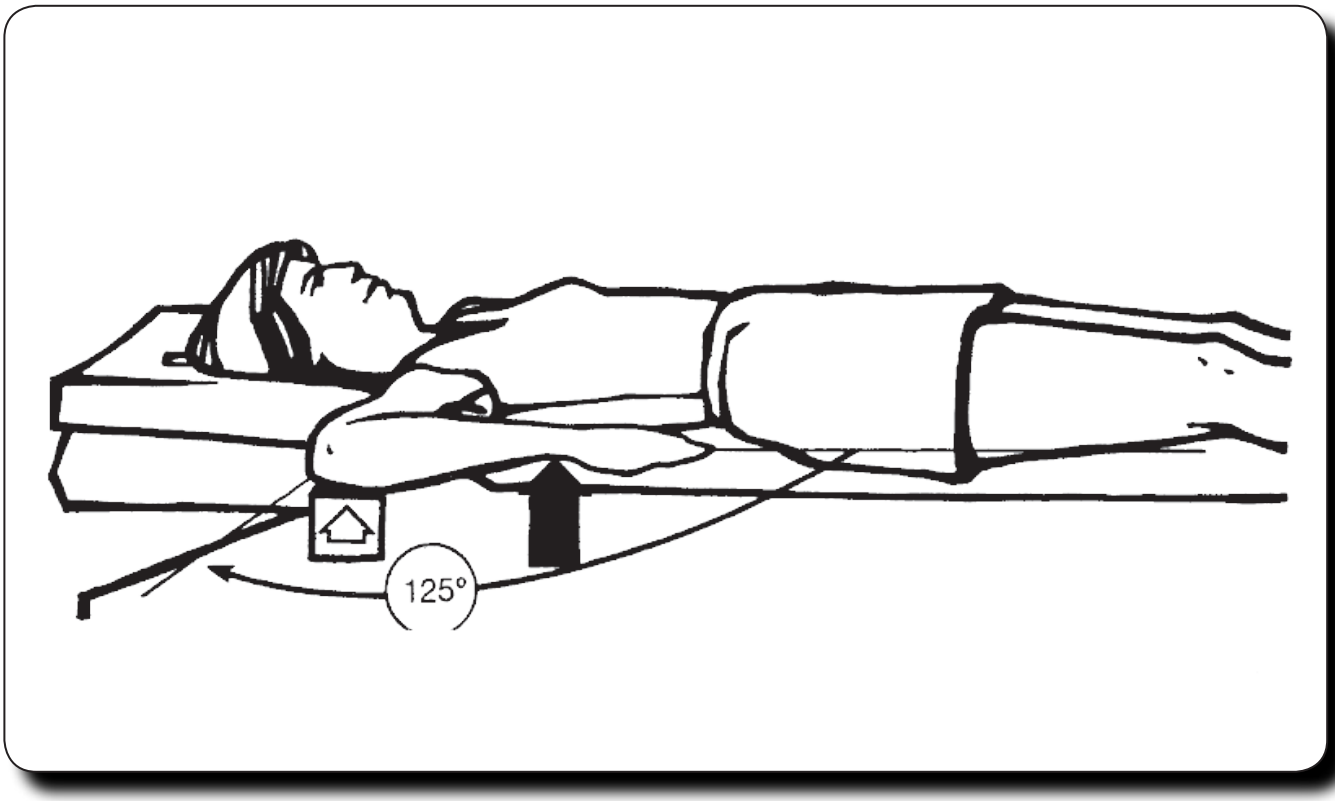
L. B. V.L. : T7L

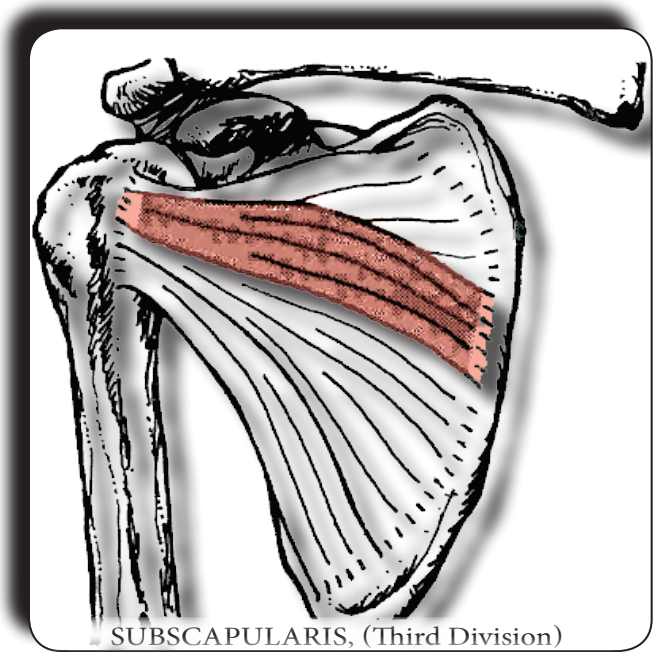
M. M. : C7

CRANIAL: Maxillary

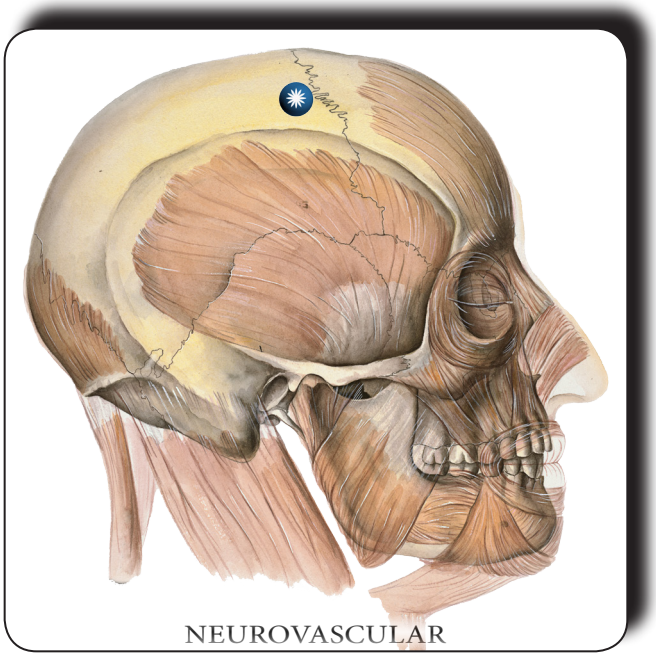
FOOT: 3rd Metatarsal

NUTRIENT SOURCE:
1. Betacol (S)

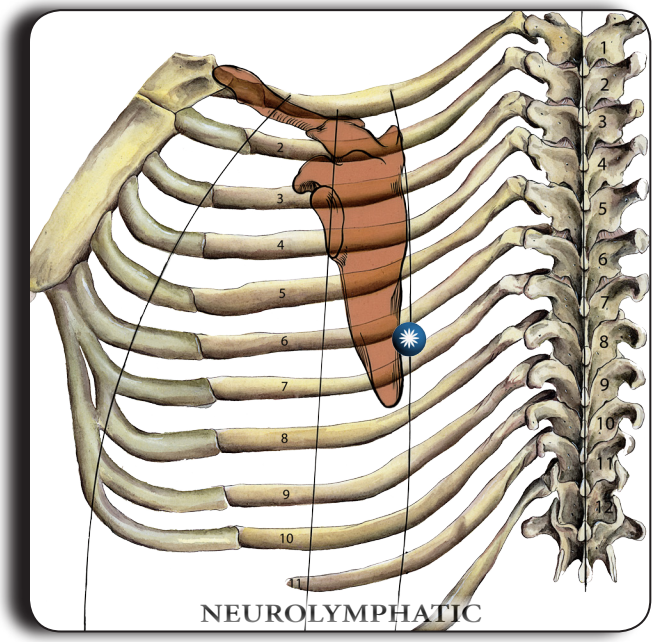




SUBSCAPULARIS, (Third Division)



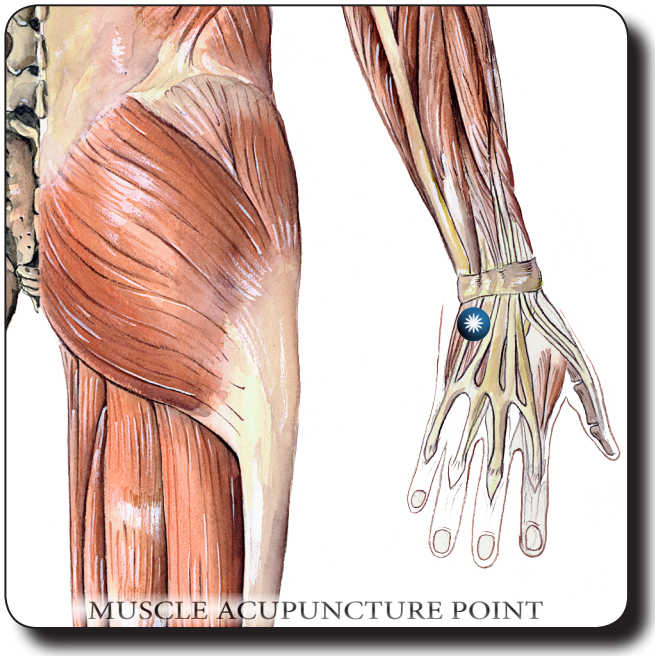
NEUROVASCULAR



NEUROLYMPHATIC

VOR I

VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 438: SUBSCAPULARIS, (Third Division)

ORIGIN: The inferior portion of upper half of the Subscapular fossa.

INSERTION: Lesser tuberosity of humerus.

ACTION: Rotates arm internally. Draws the humerus toward the glenoid fossa. Assists in flexion, extension, abduction and adduction of the arm on shoulder.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Abduct arm 110 degrees and internally rotate arm until hand is in mid-coronal plane

Doctor: Position: Ipsilateral.
Brace: Distal lateral surface of arm.
Contact: Distal medial surface of forearm to externally rotate arm on shoulder.

NEUROVASCULAR: (Lat) Parietal bone, superior aspect, 1" superior to superior temporal line, directly above EAC.

NEUROLYMPHATIC: (Post/L) 6th ICS, vertebral border of scapula.

VISCERAL ORGAN:

I. *Sphenoid Sinuses:* (Ant/Midline) Cranium, anterior aspect, Gv24.4, 1/2" superior to glabella.

II. *Thyroid:* (Lat/BL) Neck, posterior lateral aspect, belly of Upper Trapezius at level of C5.

M. A. P. : Tw3.4

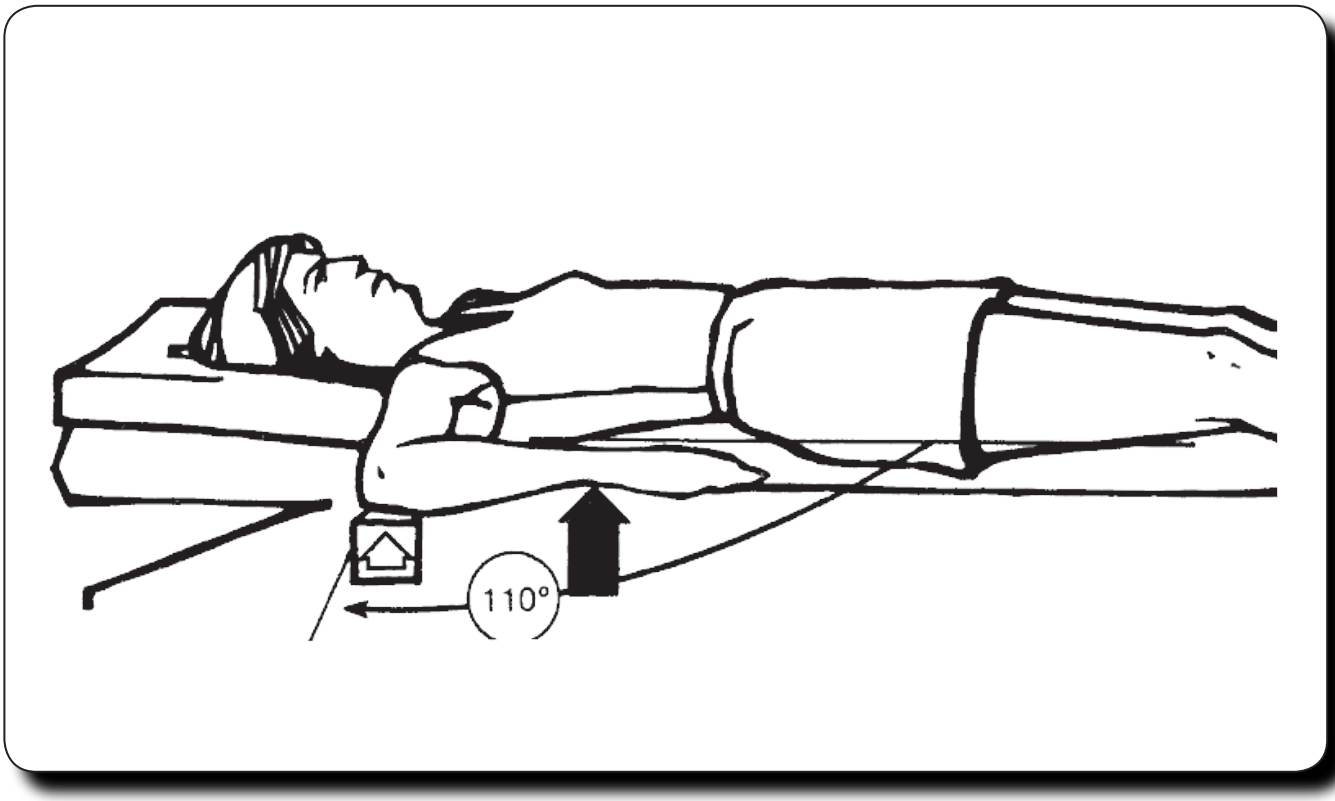
V.L. : T3L
L. B. V.L. : T8L

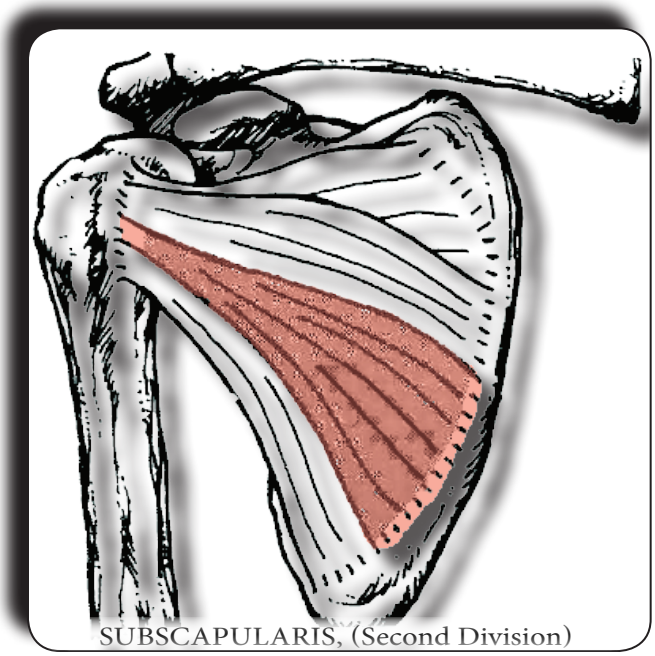
M. M. : C7

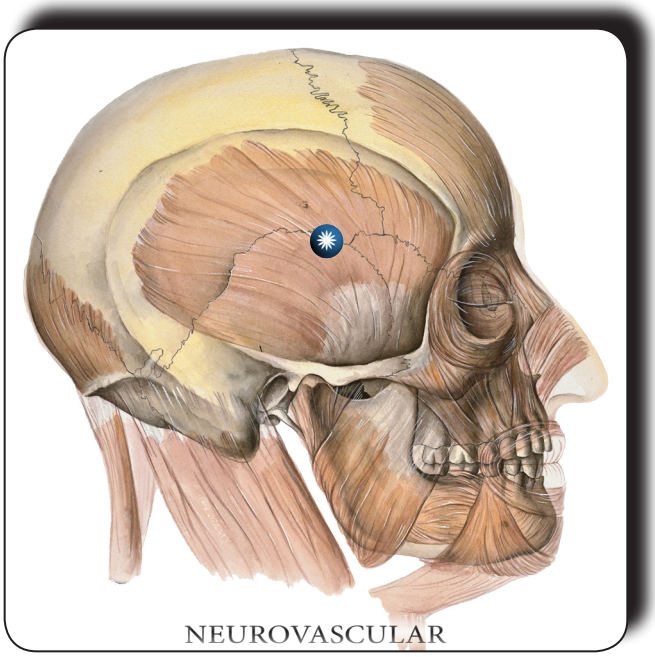
CRANIAL: Temporal

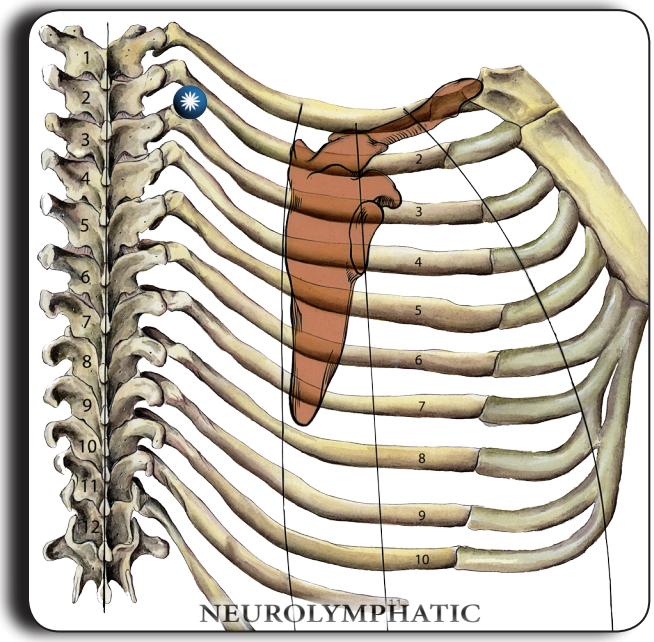
FOOT: Cuboid

NUTRIENT SOURCE:
1. Cal-Amo (S)




SUBSCAPULARIS, (Second Division)


NEUROVASCULAR



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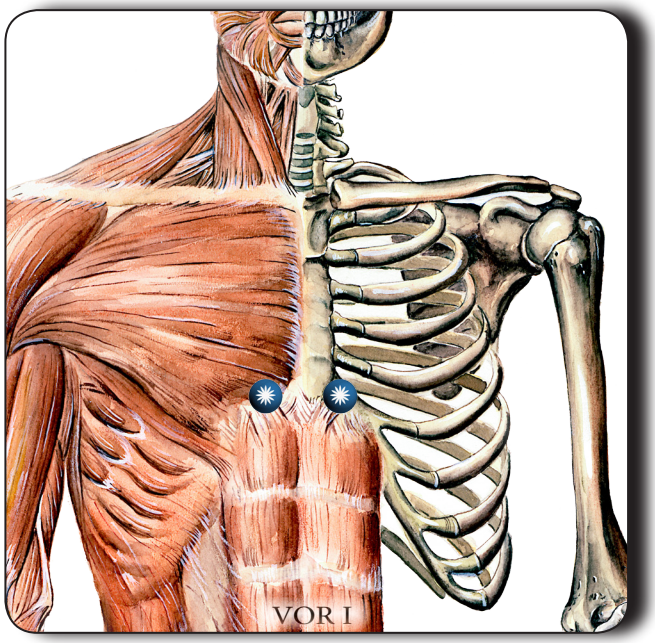
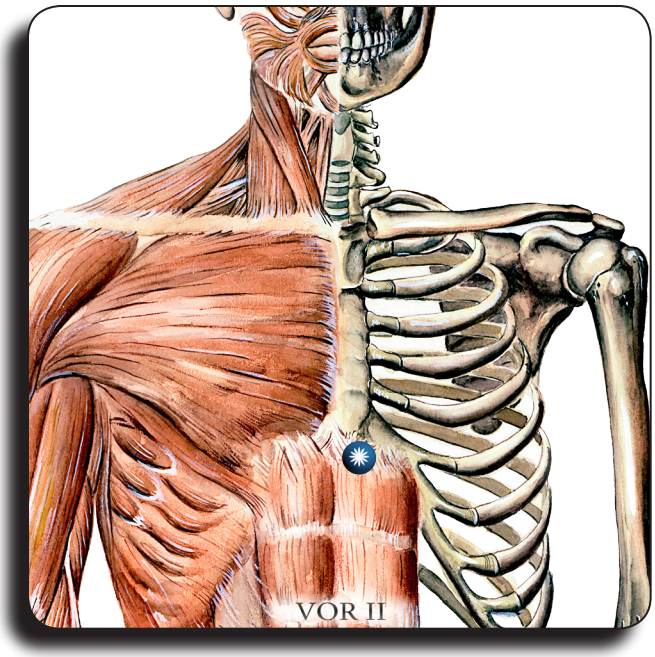
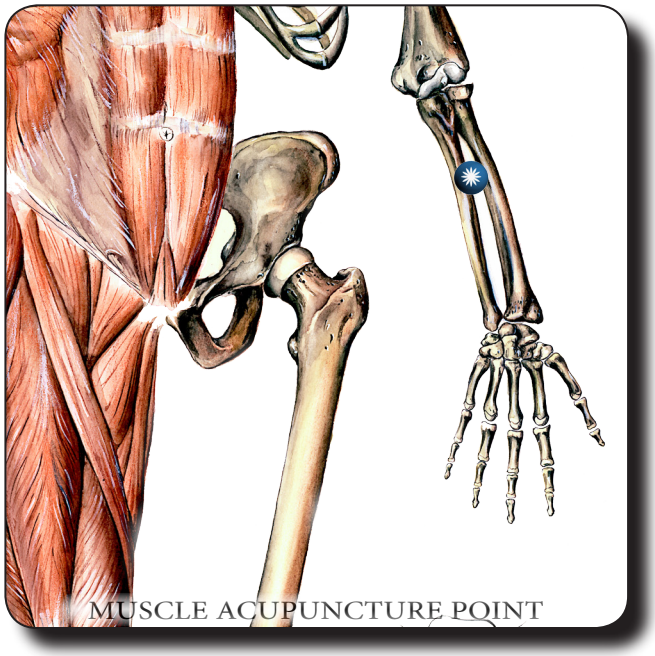

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 440: SUBSCAPULARIS, (Second Division)

ORIGIN: The superior portion of lower half of the Subscapular fossa.

INSERTION: Lesser tuberosity of humerus.

ACTION: Rotates arm internally. Draws the humerus toward the glenoid fossa. Assists in flexion, extension, abduction and adduction of the arm on shoulder.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Abduct arm 80 degrees and internally rotate arm until hand is in mid-coronal plane.

Doctor: Position: Ipsilateral at side. Brace: Distal lateral surface of arm. Contact: Distal medial surface of forearm to externally rotate arm on shoulder.

NEUROVASCULAR: (Lat) Cranium, lateral aspect, squamosal suture, 1" posterior to pterion.

NEUROLYMPHATIC: (Post/R) 2nd ICS, 2" lateral to spine.

VISCERAL ORGAN:

I. *Esophagus:* (Ant/BL) Ribcage, anterior aspect, junction of sternum and 6th rib.

II. *Heart:* (Ant/L) Rectus Abdominis, 4th section at Xiphoid.

M. A. P. : Cx3.5

V.L. : T2R

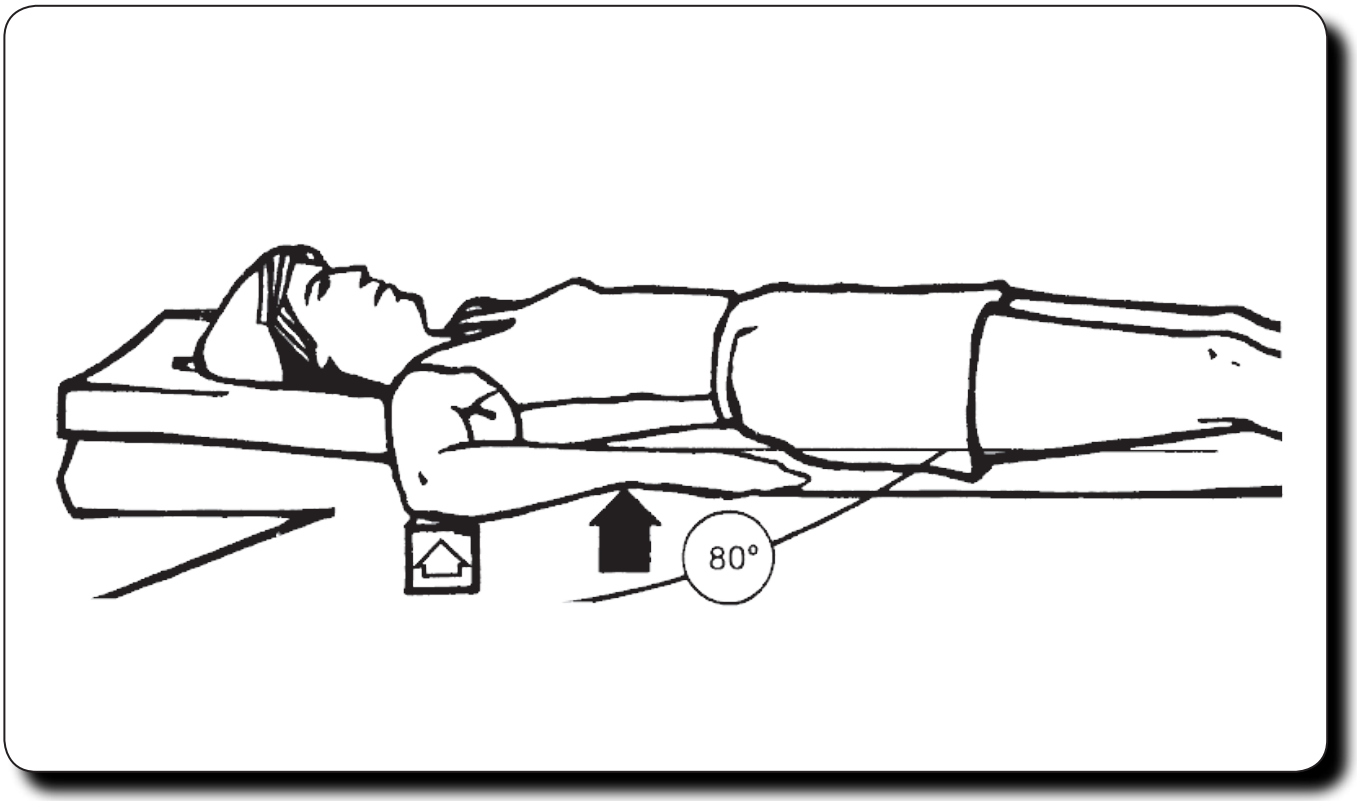
L. B. V.L. : T9R

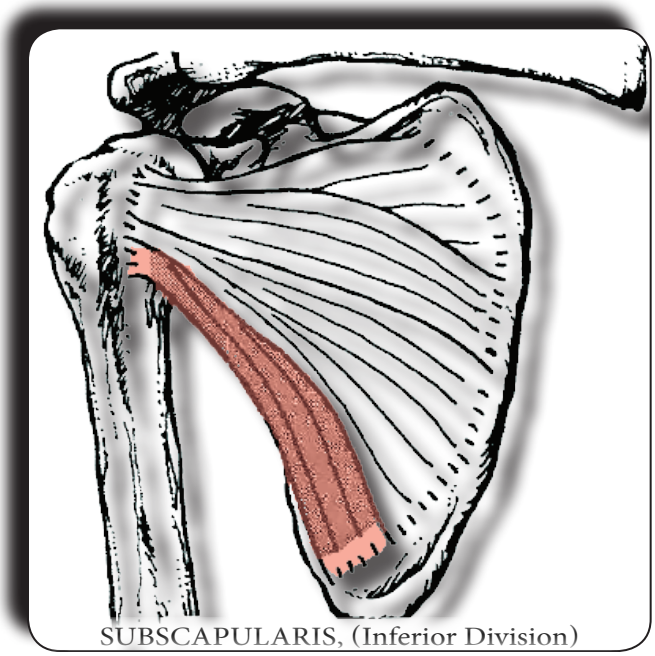
M. M. : C6

CRANIAL: Palatine

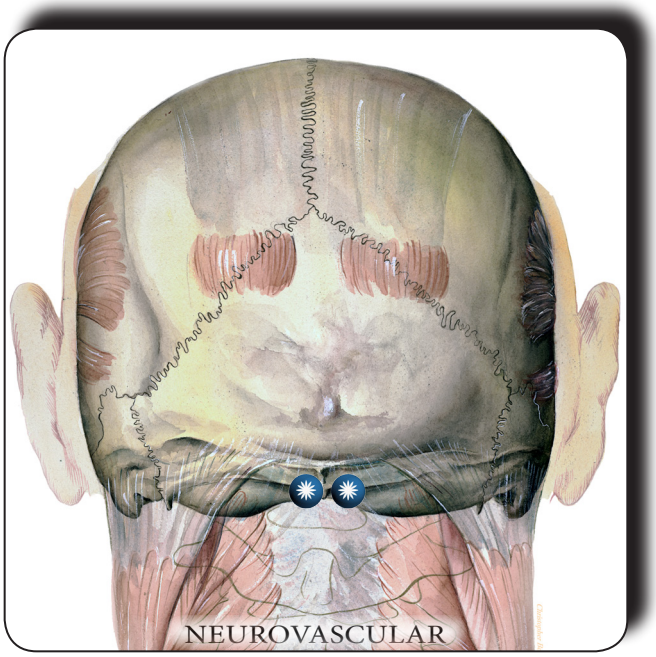
FOOT: 1st Metatarsal

NUTRIENT SOURCE:
1. Betacol (S)

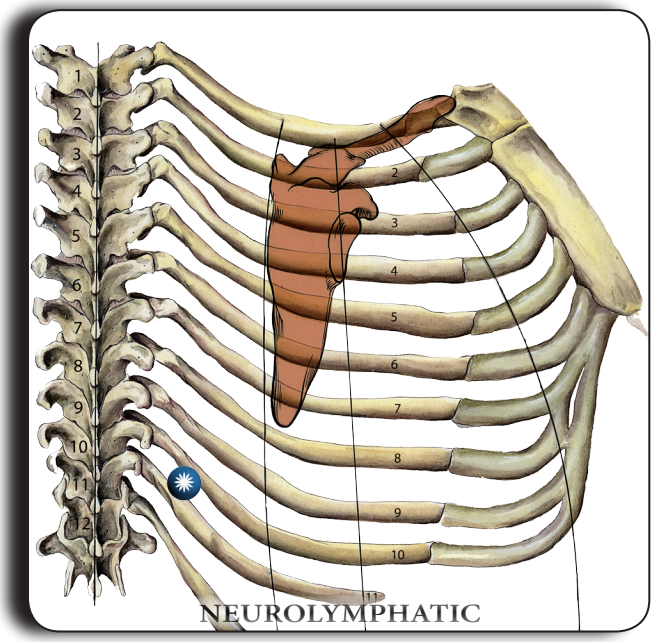




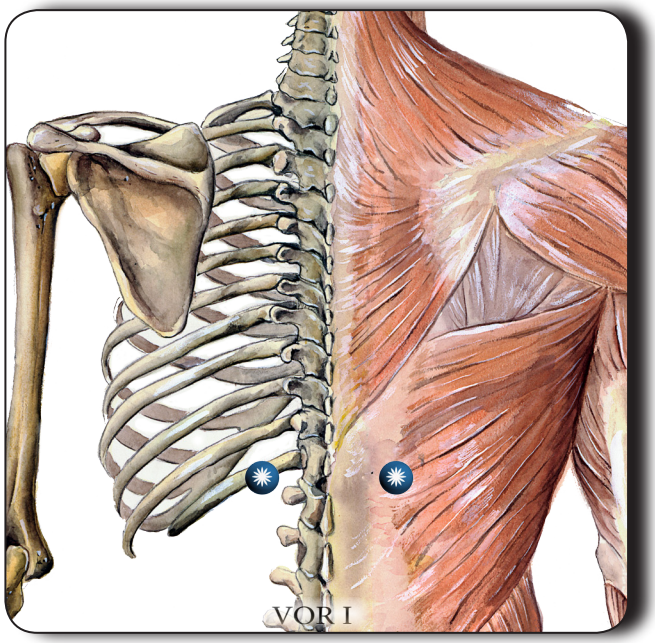
SUBSCAPULARIS, (Inferior Division)



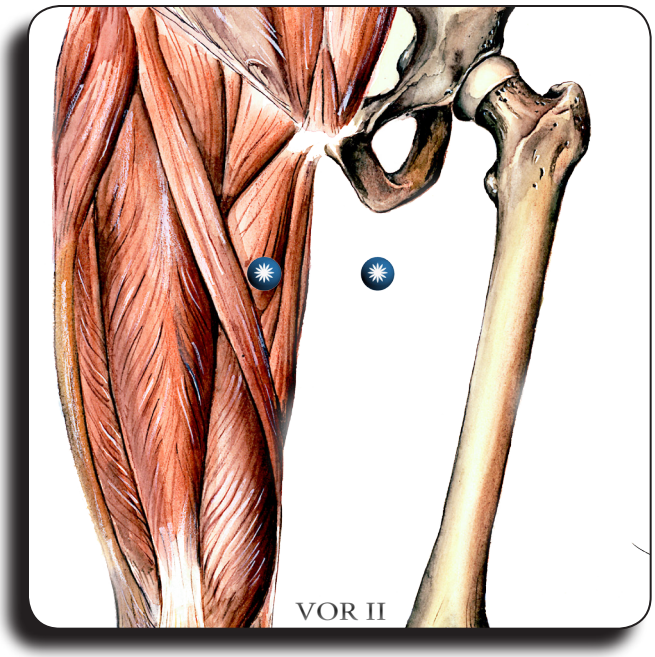
NEUROVASCULAR



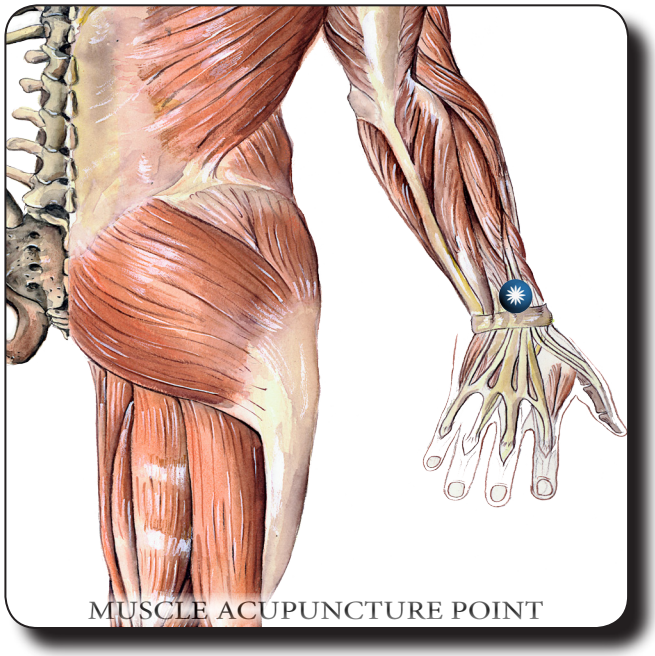
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 442: SUBSCAPULARIS, (Inferior Division)

ORIGIN: Subscapular fossa, lower fourth, near axillary border.

INSERTION: Lesser tuberosity of humerus.

ACTION: Rotates arm internally. Draws the humerus toward the glenoid fossa. Assists in flexion, extension, abduction and adduction of the arm on shoulder.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees, abduct arm 60 degrees and internally rotate arm until hand is near pelvis.

Doctor: Position: Ipsilateral.
Brace: Distal lateral surface of arm.
Contact: Distal medial surface of forearm to externally rotate arm on shoulder.

NEUROVASCULAR: (Post/BL) Occipital bone, just lateral to midline and just superior to atlas.

NEUROLYMPHATIC: (Post/R) 10th ICS, 2 - 3" lateral to spine.

VISCERAL ORGAN:

I. *Pancreas duct system:* (Post/BL) Ribcage, posterior aspect, on 12th rib, 1" lateral to spine.

II. *Prostate/Uterus:* (Ant/BL) Thigh, medial aspect, two-thirds from knee to pubes Lv9.7.

M. A. P. : Tw4.5

V.L. : C4R

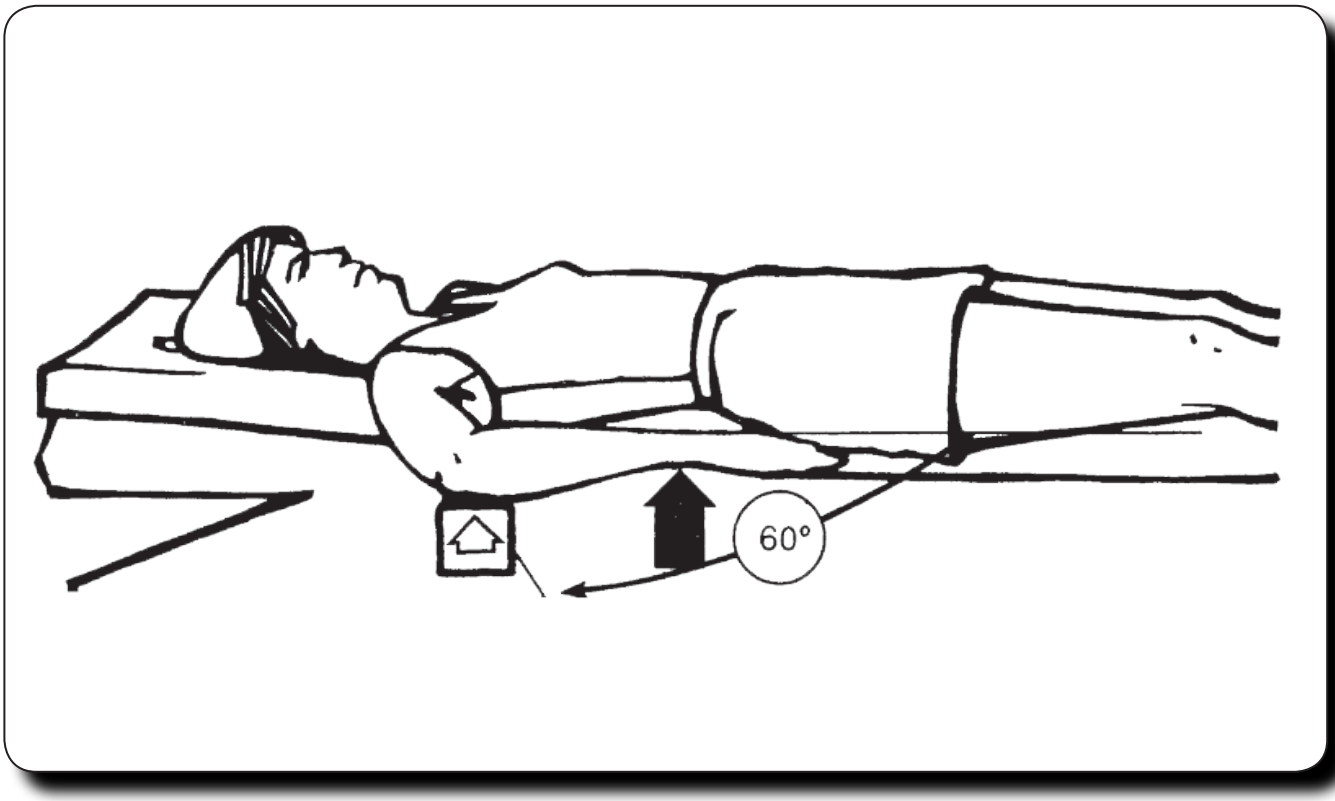
L. B. V.L. : L2R

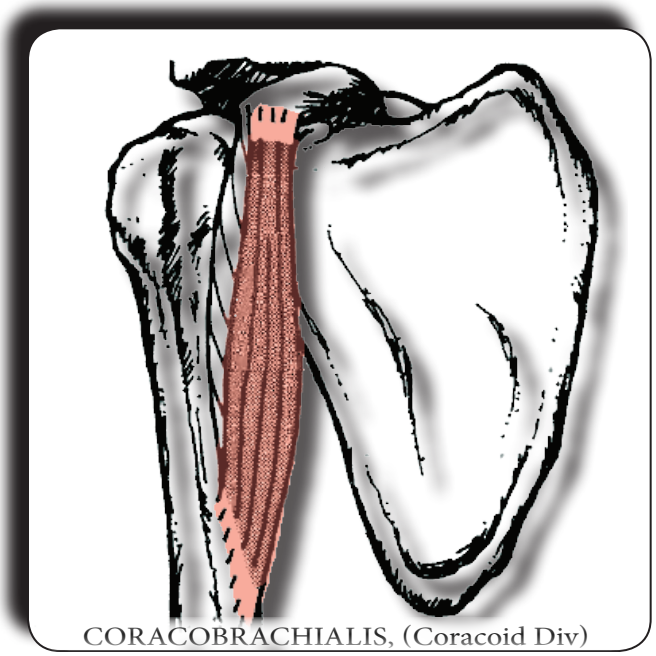
M. M. : C6

CRANIAL: Maxillary

FOOT: 3rd Metatarsal

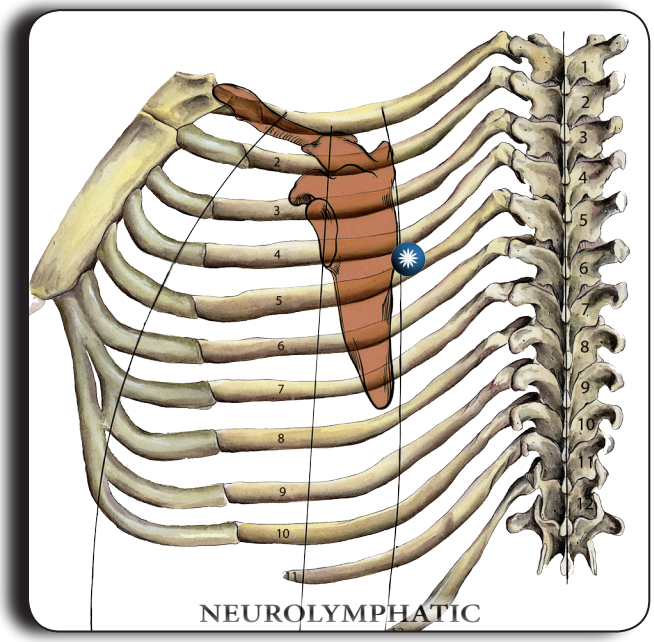
NUTRIENT SOURCE:
1. B 12 (S)





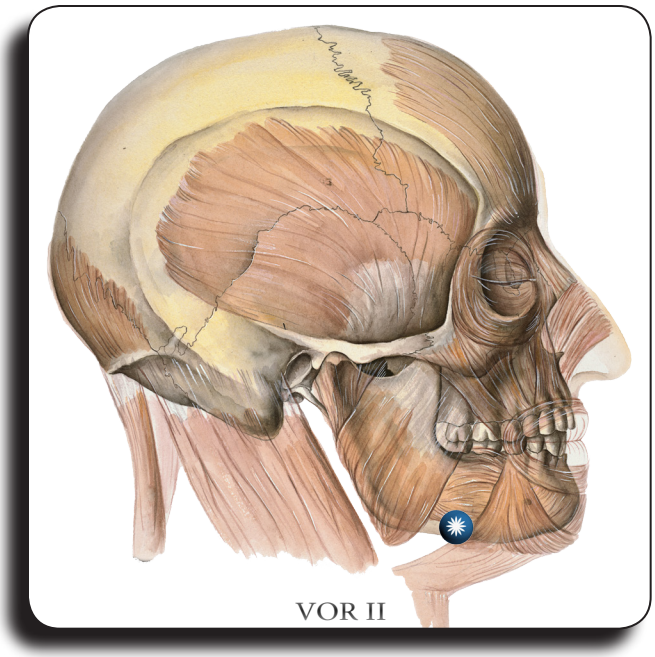
CORACOBRACHIALIS, (Coracoid Div)

NEUROVASCULAR

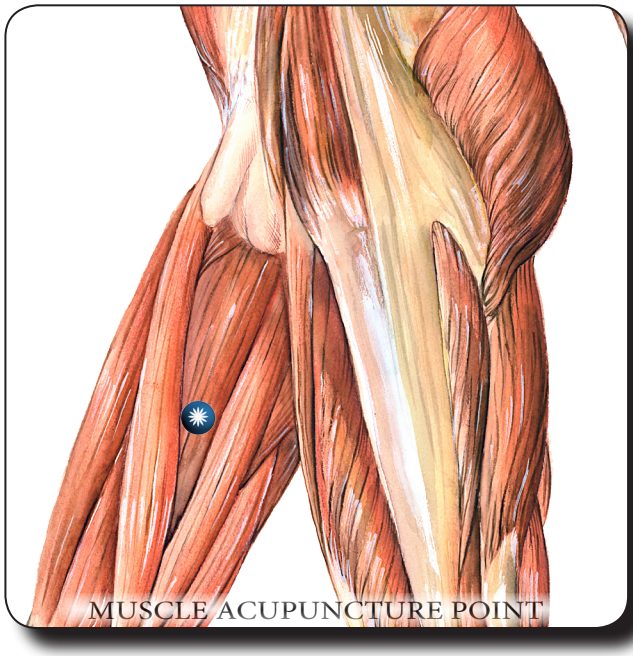


NEUROLYMPHATIC

VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 444: CORACOBRACHIALIS, (Coracoid Division)

ORIGIN: Tip of coracoid process of scapula.

INSERTION: Middle of medial border of humerus, opposite Deltoid tuberosity.

ACTION: Flexes, externally rotates and adducts the arm on shoulder.

TEST:

Patient: Supine. With elbow fully extended, abduct humerus 45 degrees, fully externally rotate and flex the arm on shoulder 10 degrees..

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Medial distal aspect of forearm to extend through sagittal plane.

NEUROVASCULAR: (Ant/BL) Nasal suture, just superior and medial to B1.

NEUROLYMPHATIC: (Post/L) 4th ICS, at vertebral border of scapula.

VISCERAL ORGAN:

I. *Kidney:* (Ant/BL) Rectus Abdominis, 2nd section, medial border at origin.

II. *Nose:* (Lat/BL) Mandible, St5.

M. A. P. : Lv9.5

V.L. : C5L

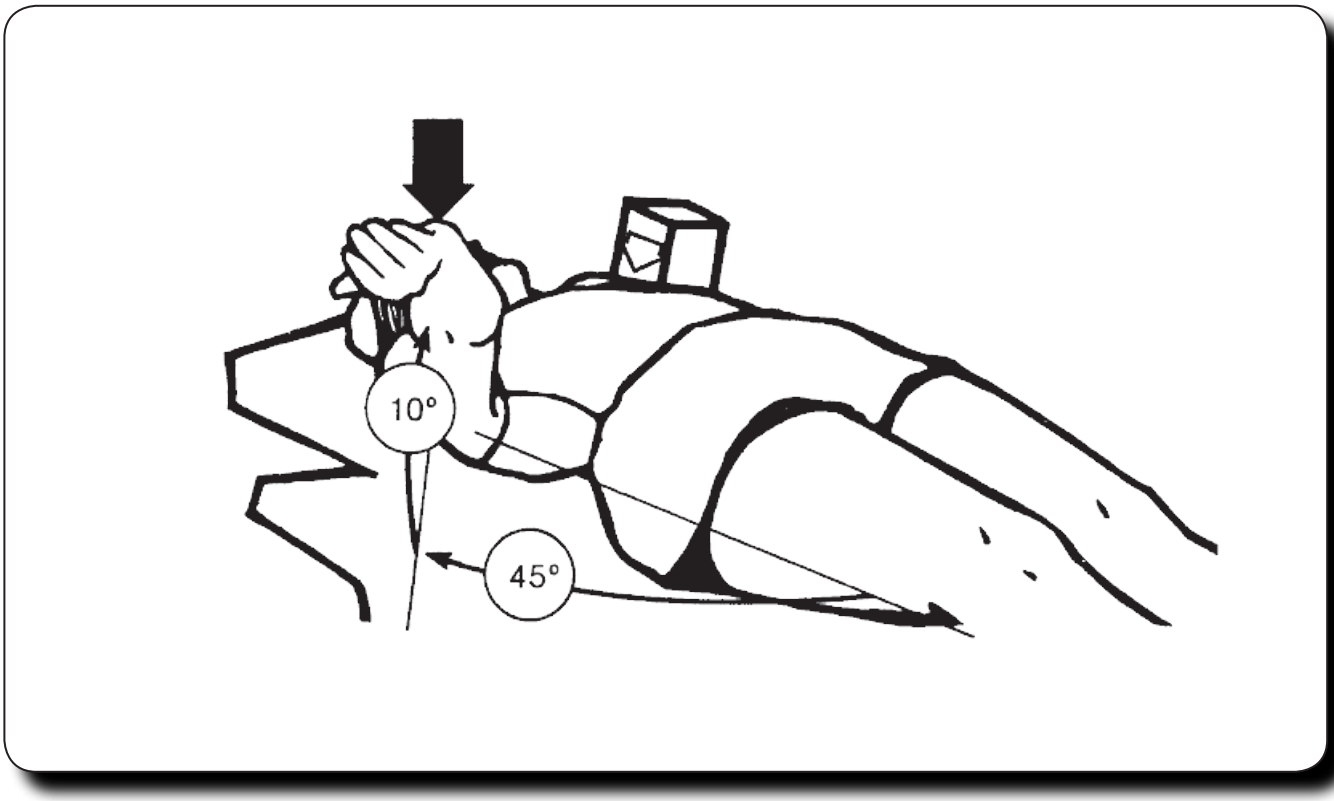
L. B. V.L. : L1L

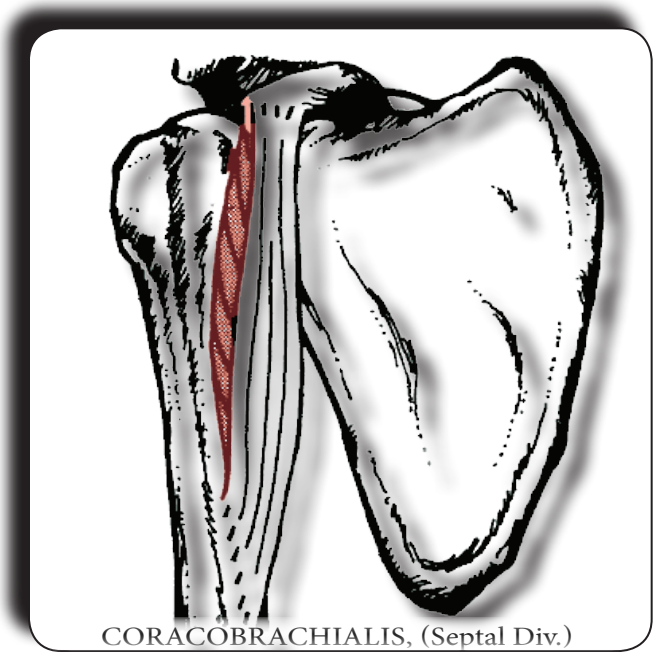
M. M. : C7

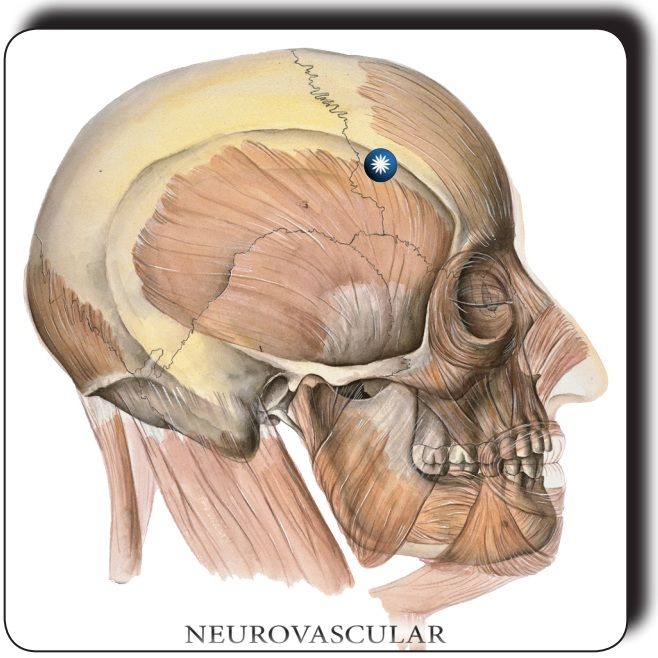
CRANIAL: Styloid

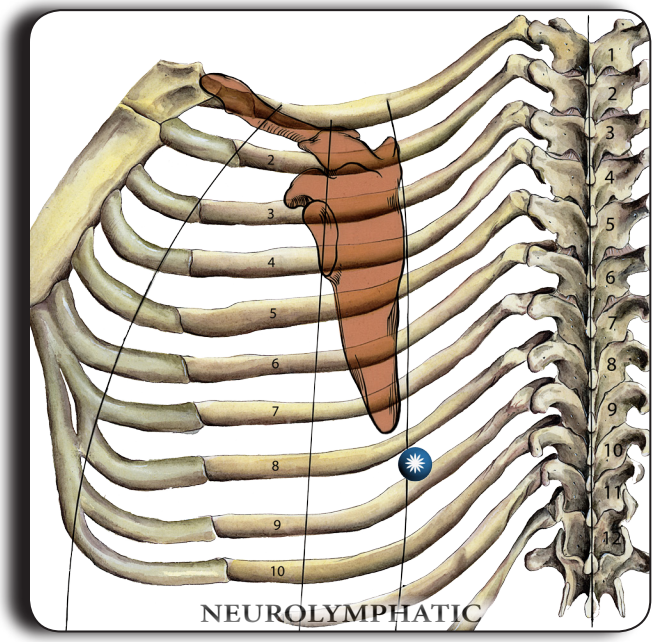
FOOT: Distal phalanx of great toe

NUTRIENT SOURCE:
1. Inositol (S)

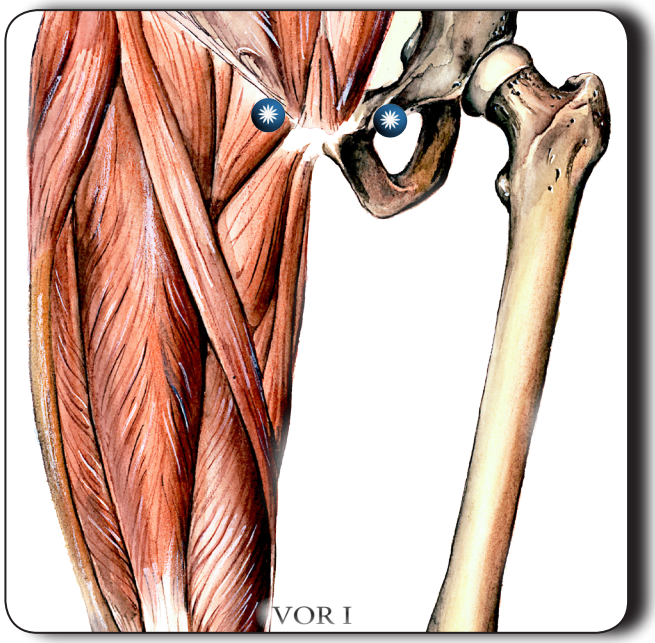


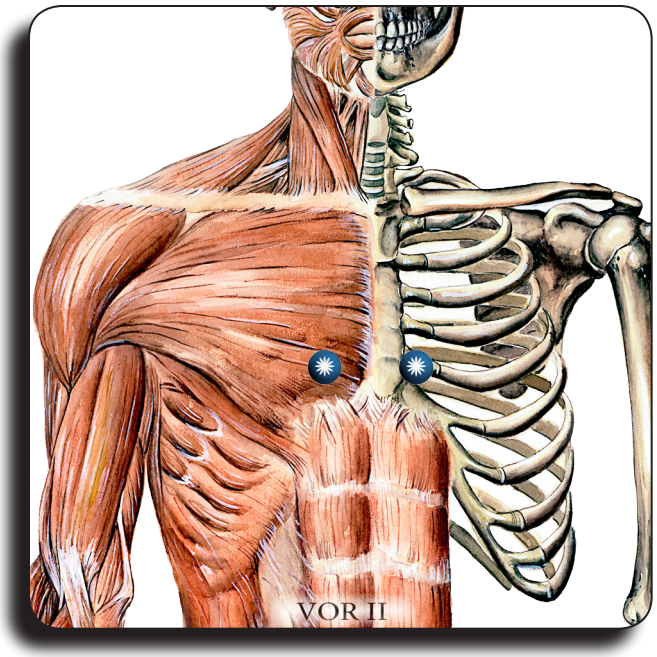

CORACOBRACHIALIS, (Septal Div.)

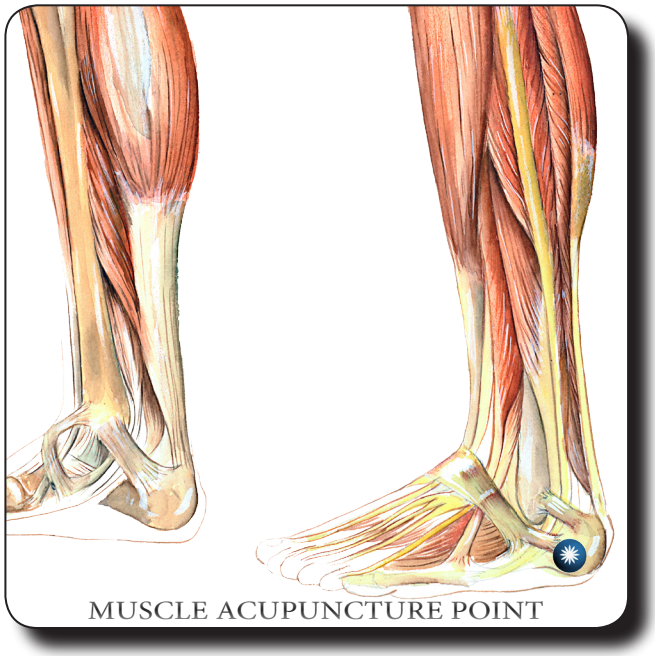

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 446: CORACOBRACHIALIS, (Septal Division)

ORIGIN: From the intramuscular septum between Biceps Brachii and Coracobrachialis .

INSERTION: Middle of the medial surface and border of the body of the humerus.

ACTION: Flexes, externally rotates and adducts the arm on shoulder.

TEST:

Patient: Supine. With elbow fully extended, abduct humerus 45 degrees, fully externally rotate and flex the arm on shoulder 10 degrees.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Medial distal aspect of forearm to abduct away from the body.

NEUROVASCULAR: (Lat) Frontal bone, lateral aspect, superior temporal line just before coronal suture.

NEUROLYMPHATIC: (Post/L) 8th ICS, at vertebral border of scapula.

VISCERAL ORGAN:

I. Bladder: (Ant/BL) Pelvis, Pubic area, superior ramus just below St30.

II. *Lungs:* (Ant/BL) Ribcage, anterior aspect, 5th costocartilage area between end of rib and sternum, K22.5.

M. A. P. : B61.5

V.L. : T5L

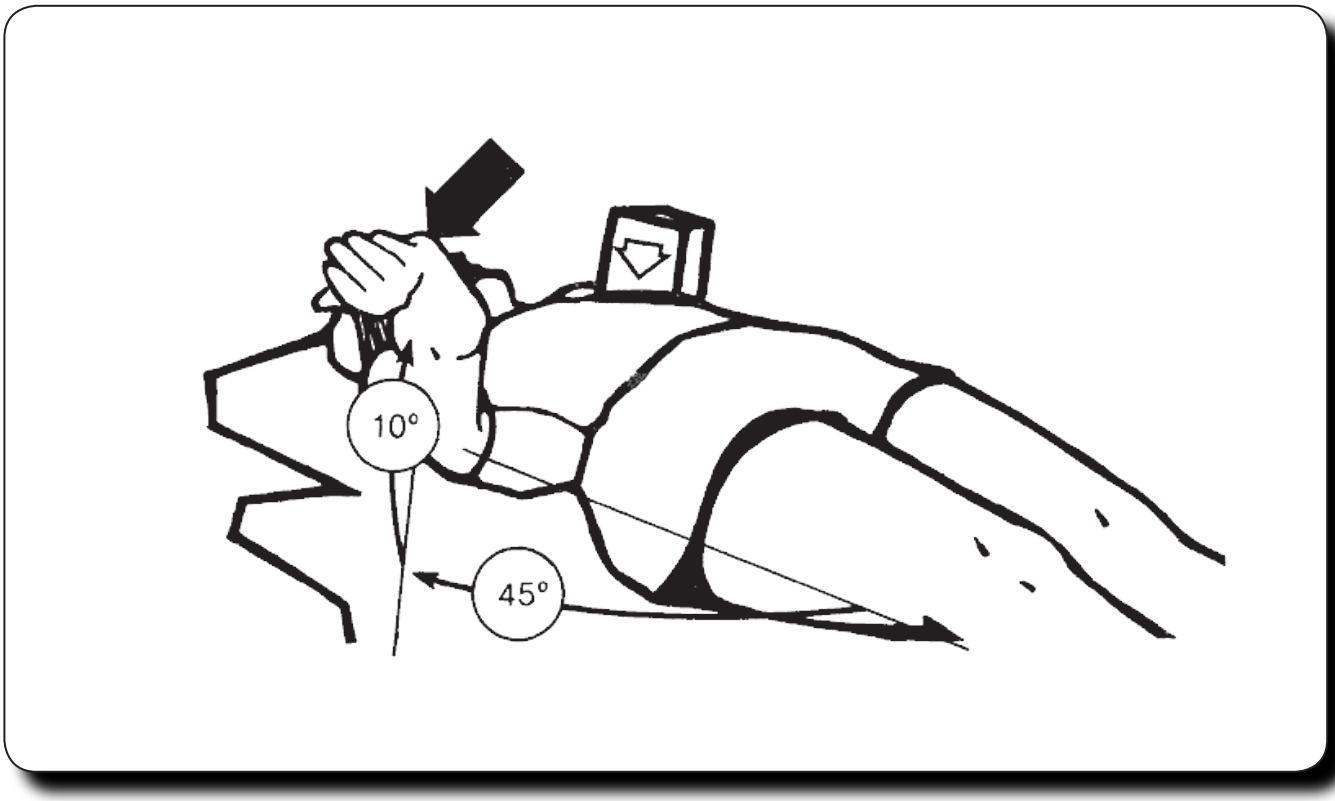
L. B. V.L. : T6L

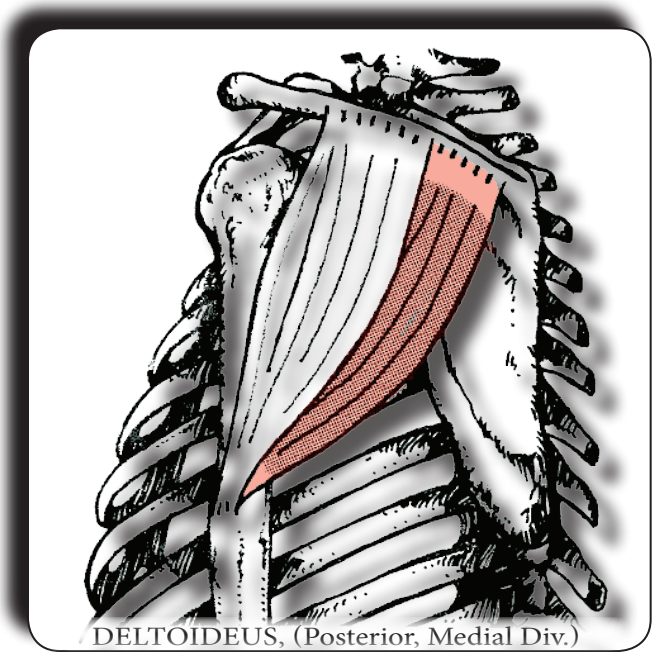
M. M. : C7

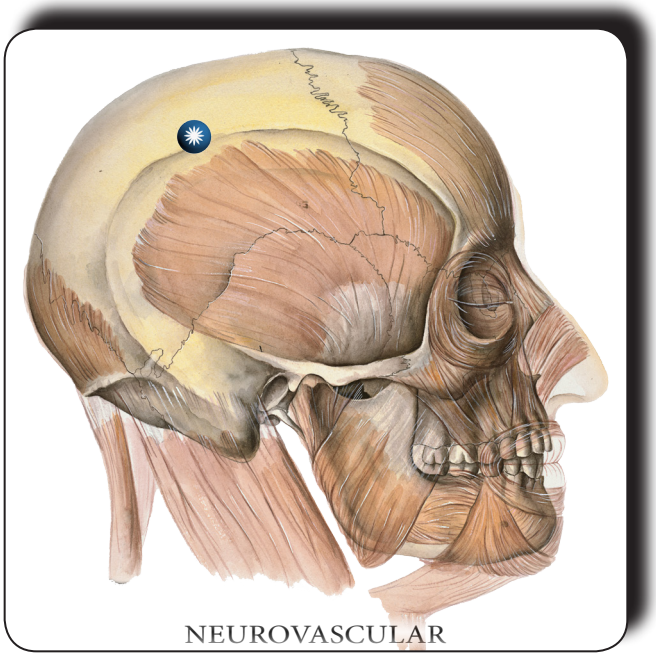
CRANIAL: Vomer

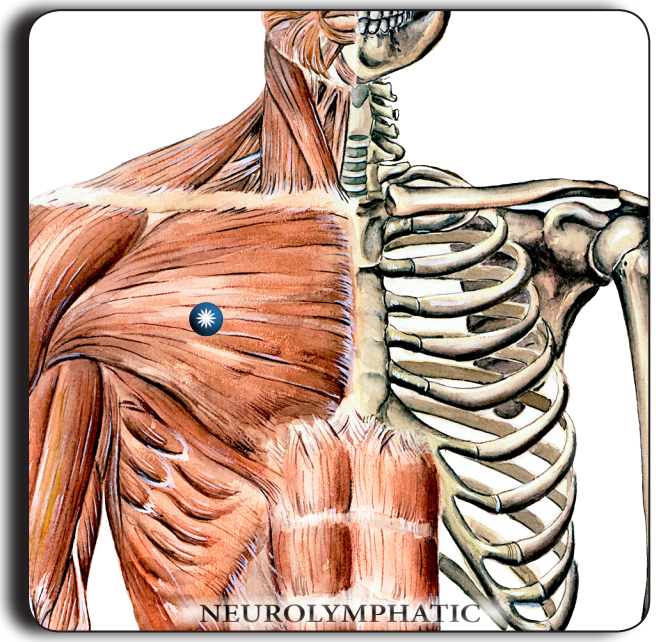
FOOT: 2nd Metatarsal

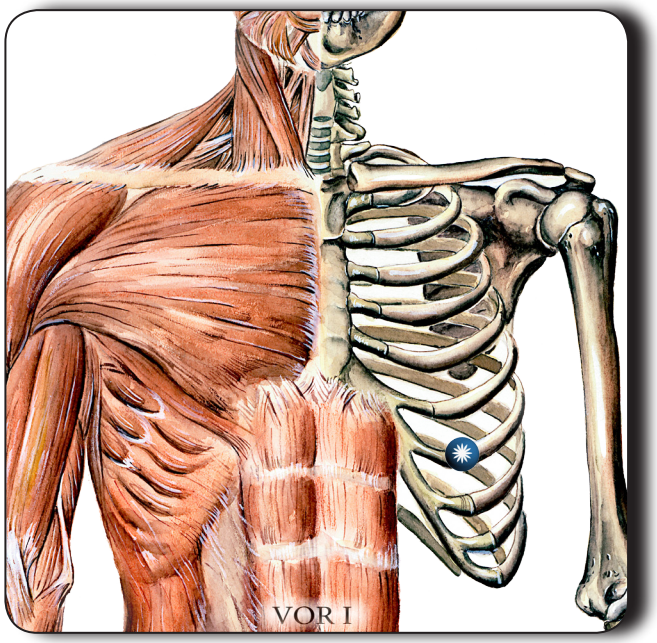
NUTRIENT SOURCE:
1. Betacol (S)

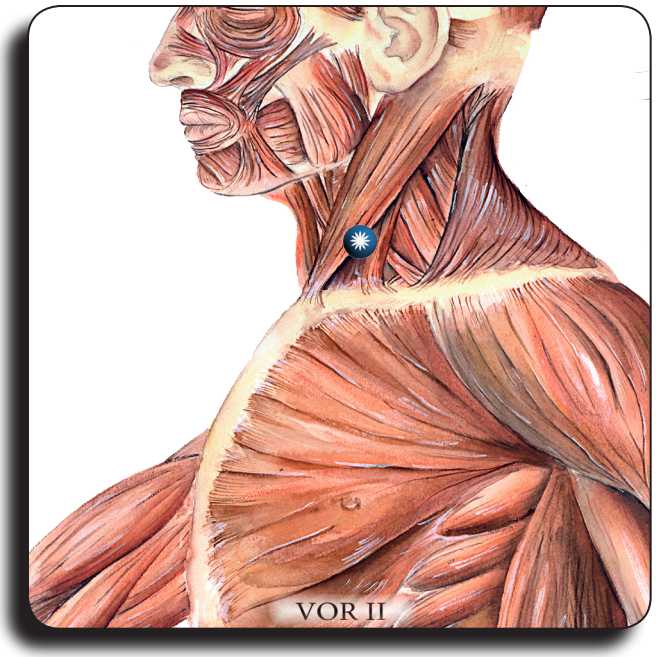


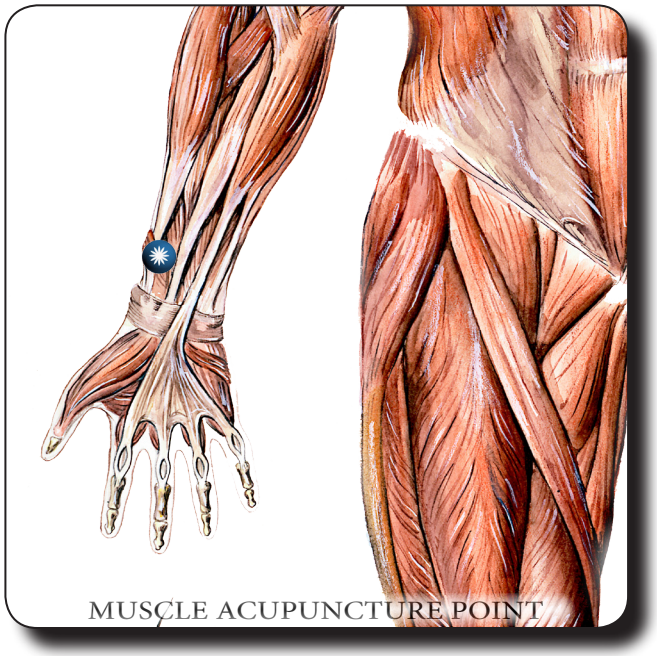

DELTOIDEUS, (Posterior, Medial Div.)


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 448: DELTOIDEUS, (Posterior, Medial Division)

ORIGIN: Inferior margin of spine of scapula, most medial fibers.

INSERTION: Posterior aspect of Deltoid prominence .

ACTION: Abducts and extends the arm on shoulder.

TEST:

Patient: Supine. Flex elbow 90 degrees, abduct arm 90 degrees, internally rotate until forearm is in coronal plane and then extend arm 23 degrees.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Distal posterior surface of arm to adduct arm on shoulder.

NEUROVASCULAR: (Lat) Parietal bone, lateral superior aspect, near parietal eminence.

NEUROLYMPHATIC: (Ant/R) 3rd ICS, midclavicular line.

VISCERAL ORGAN:

I. *Spleen:* (Ant/L) Ribcage, anterior aspect, 7th rib, just lateral to costocartilage junction.

II. *Tonsils:* (Lat/BL) Neck, anterior aspect, just superior to Li 17 in belly of SCM, Clavicular Division.

M. A. P. : Lu8

V.L. : C6L

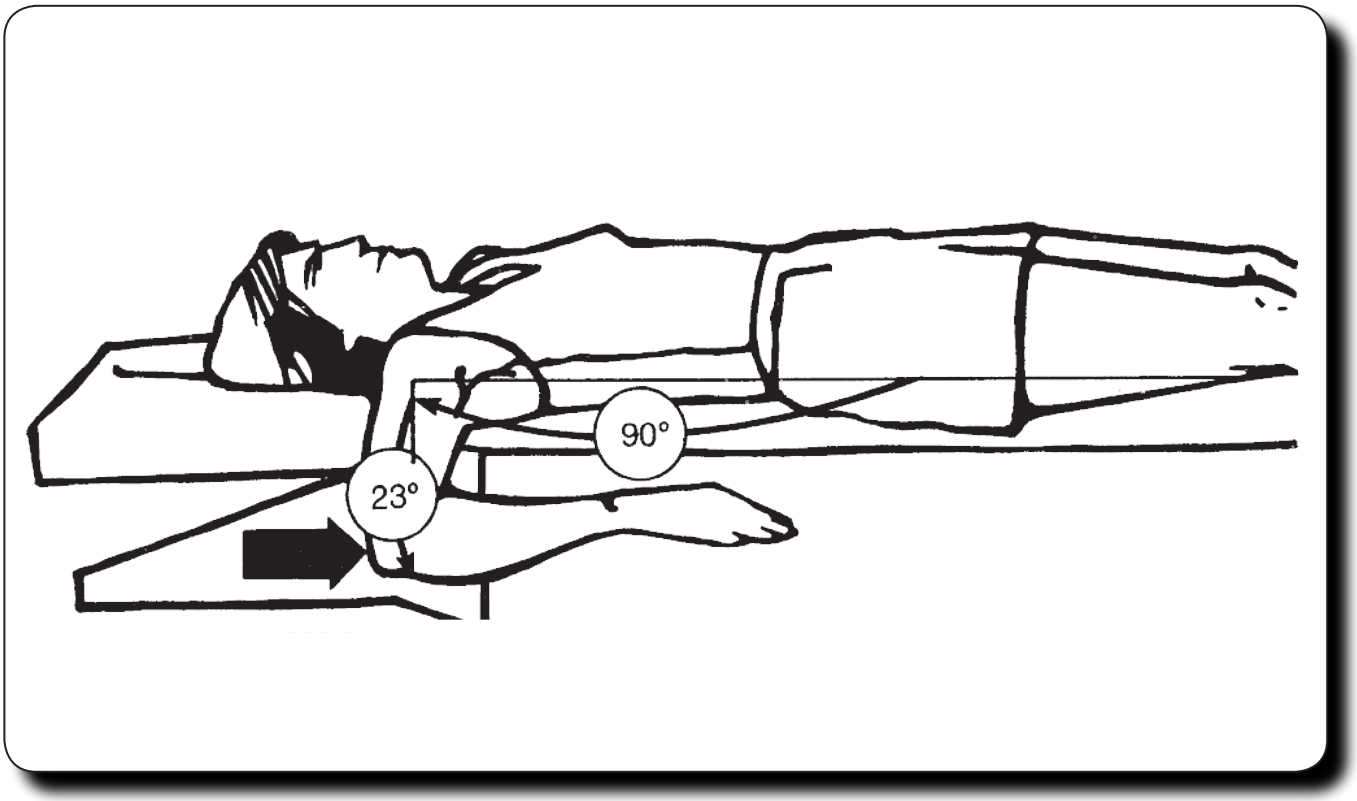
L. B. V.L. : T12L

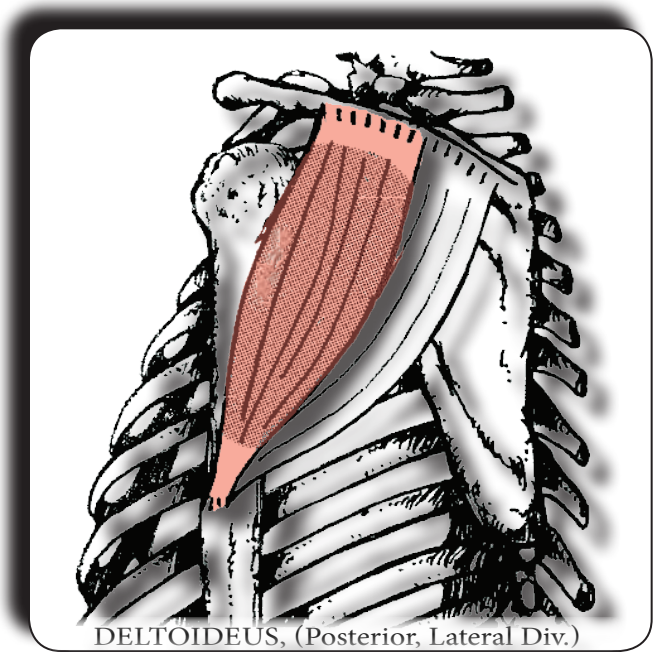
M. M. : C6

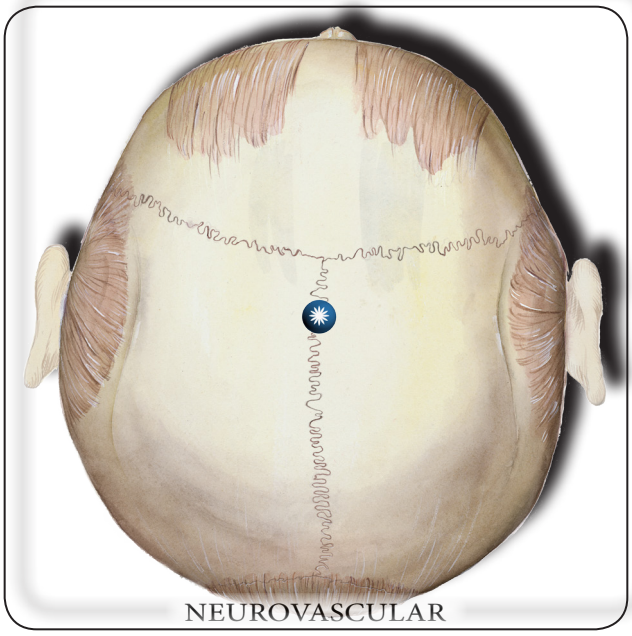
CRANIAL: Nasal

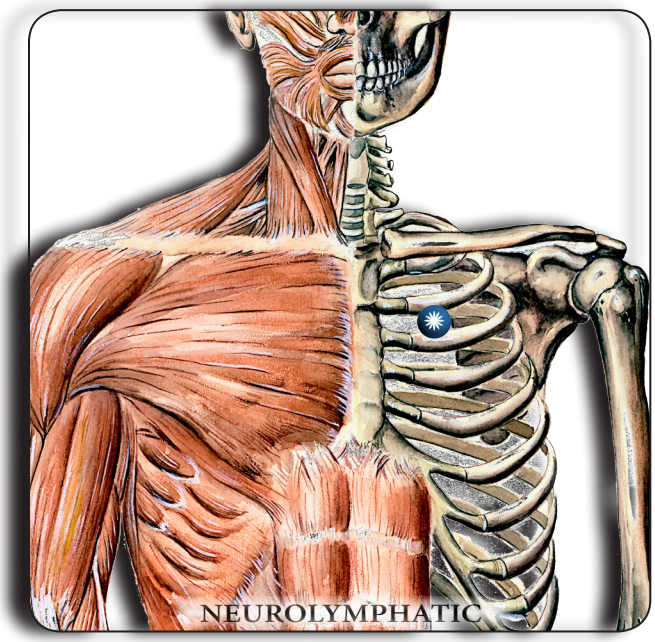
FOOT: 2nd phalanx great toe

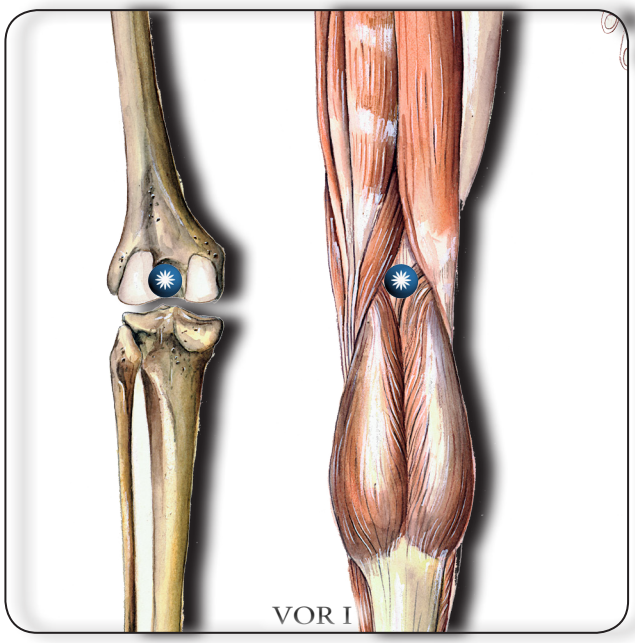
NUTRIENT SOURCE:
1. Protefood (S)



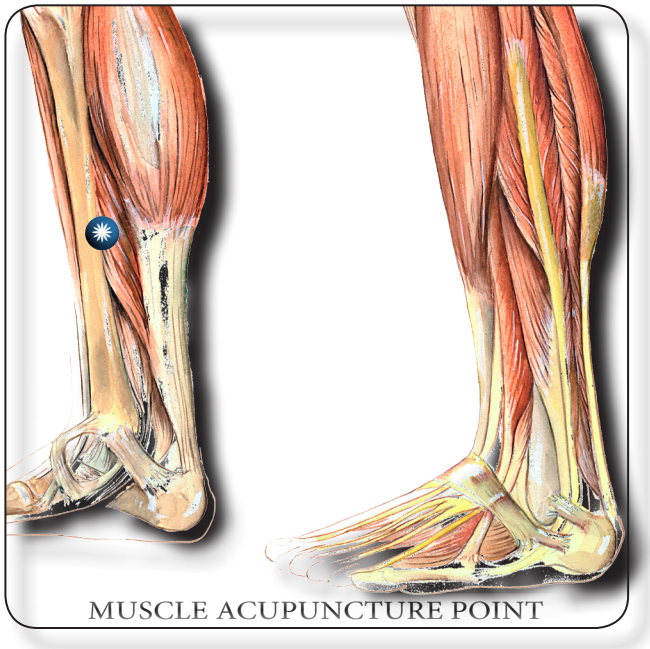

DELTOIDEUS, (Posterior, Lateral Div.)


NEUROVASCULAR


NEUROLYMPHATIC


VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 450: DELTOIDEUS, (Posterior, Lateral Division)

ORIGIN: Inferior margin of spine of scapula, most lateral fibers.

INSERTION: Posterior aspect of Deltoid prominence.

ACTION: Abducts and extends the arm on shoulder.

TEST:

Patient: Supine. Flex elbow 90 degrees. Abduct arm 90 degrees, internally rotate until forearm is in coronal plane.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Distal posterior surface of arm to adduct arm through coronal plane.

NEUROVASCULAR: (Sup) Cranium, superior aspect, sagittal suture, 1" posterior to anterior fontanelle.

NEUROLYMPHATIC: (Ant/L) 2nd ICS, 2 1/2" lateral to sternum.

VISCERAL ORGAN:

I. *Eyes:* (Post/BL) Knee, posterior aspect, Popliteal fossa, 1-2" superior to B54.

II. *Colon - Ascending/Descending:* (Ant/BL) Rectus Abdominis, first section. lateral edge, level of crest of ilium.

M. A. P. : Lv6

V.L. : L2L

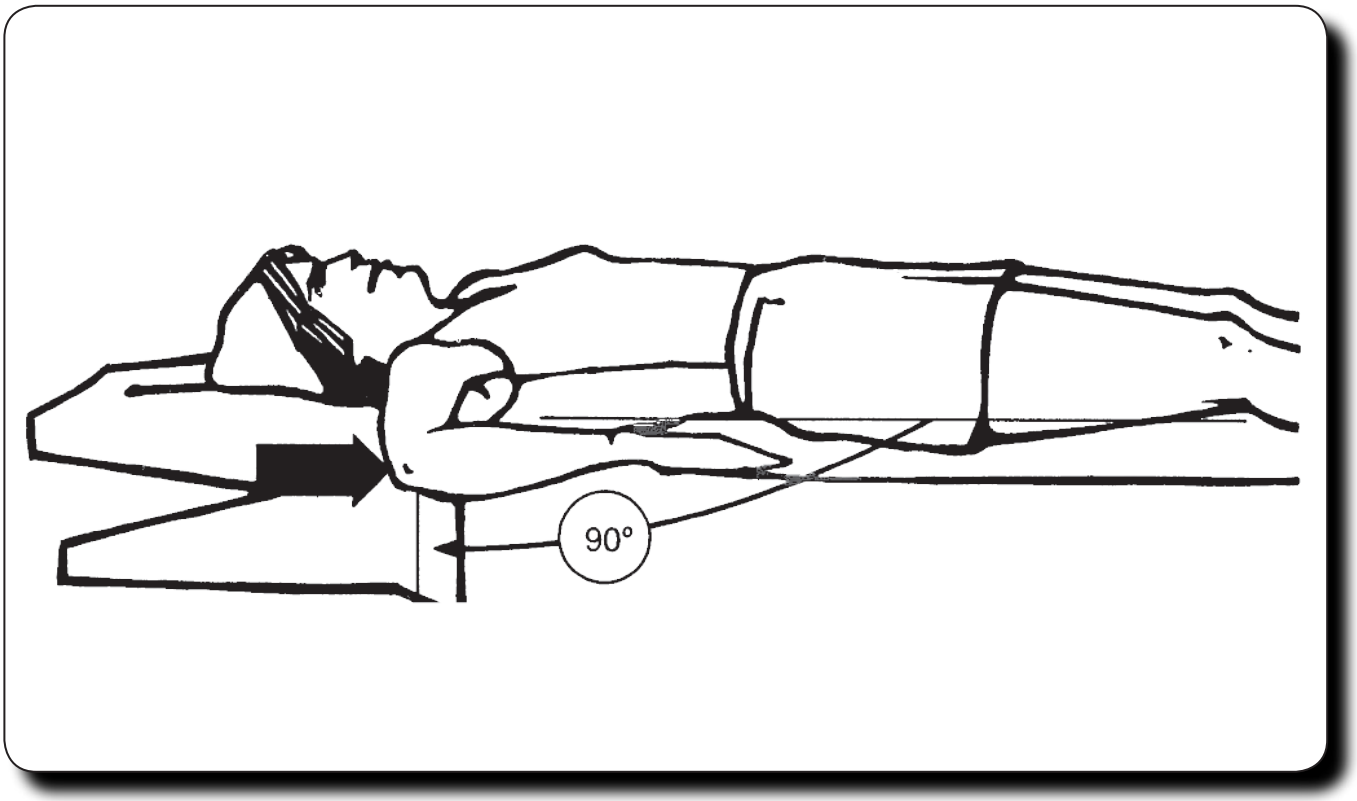
L. B. V.L. : C4L

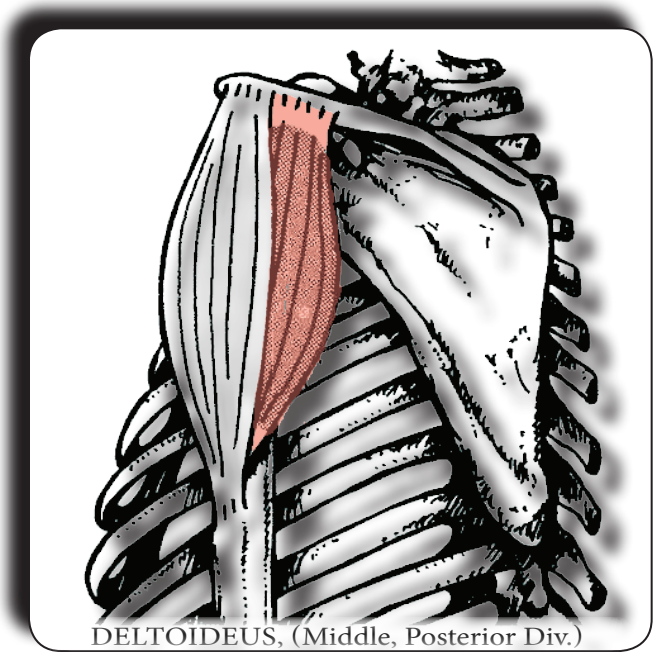
M. M. : C6

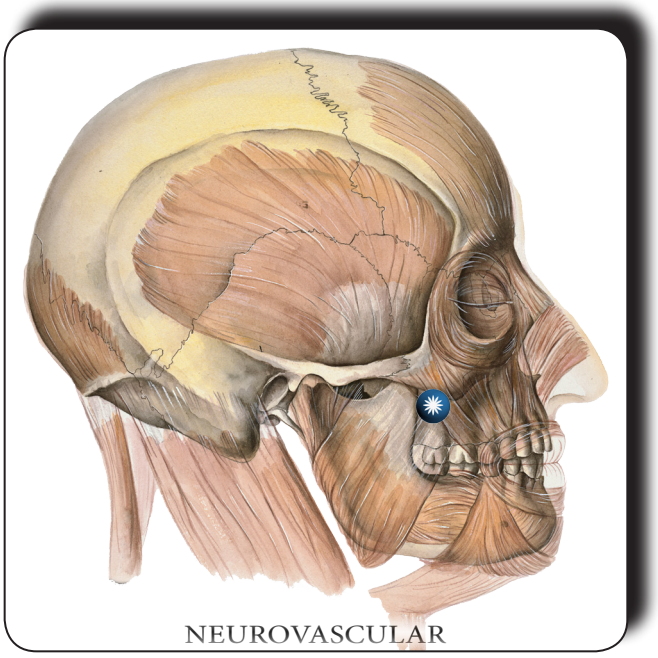
CRANIAL: Temporal

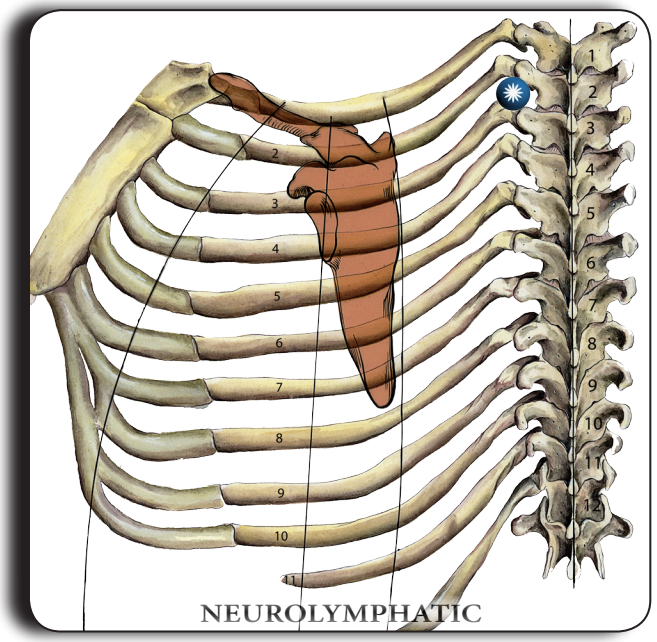
FOOT: Cuboid

NUTRIENT SOURCE:
l. Super EFF (S)

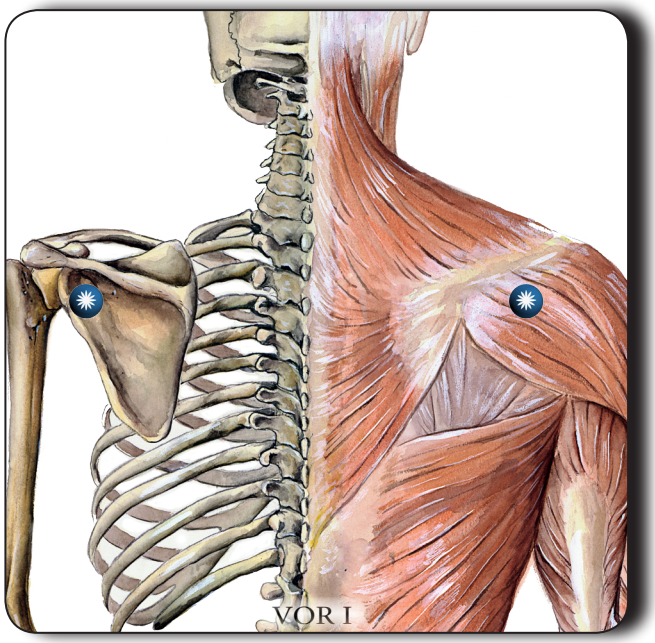


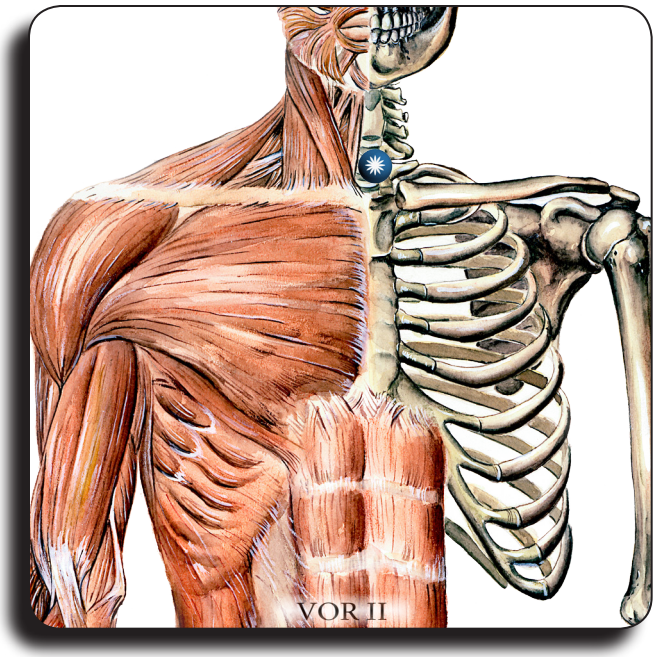

DELTOIDEUS, (Middle, Posterior Div.)

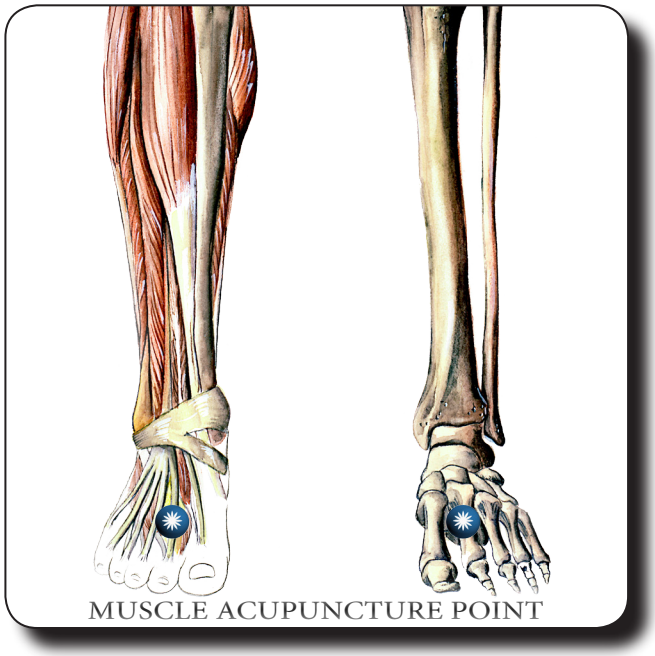

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 452: DELTOIDEUS, (Middle, Posterior Division)

ORIGIN: Acromion process of scapula.

INSERTION: Deltoid tuberosity of humerus.

ACTION: Abducts arm on shoulder.
NOTE: Elbow should be relaxed and flexed 90 degrees.

TEST:

Patient: Supine. With elbow flexed 90 degrees, abduct arm on shoulder 90 degrees with slight internal rotation. Hand should be below the level of the shoulder.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Superior surface of elbow to adduct humerus through coronal plane.

NEUROVASCULAR: (Lat) Maxillary bone, superior posterior aspect near the coronoid process of mandible.

NEUROLYMPHATIC: (Post/L) 2nd ICS, at spine.

VISCERAL ORGAN:

I. *Spleen:* (Post/BL) Scapula, Infraspinatus fossa, belly of Infraspinatus.

II. *Lungs:* (Ant/Midline) Cv22.2, just above sternal notch.

M. A. P. : Lv3

V.L. : C5L

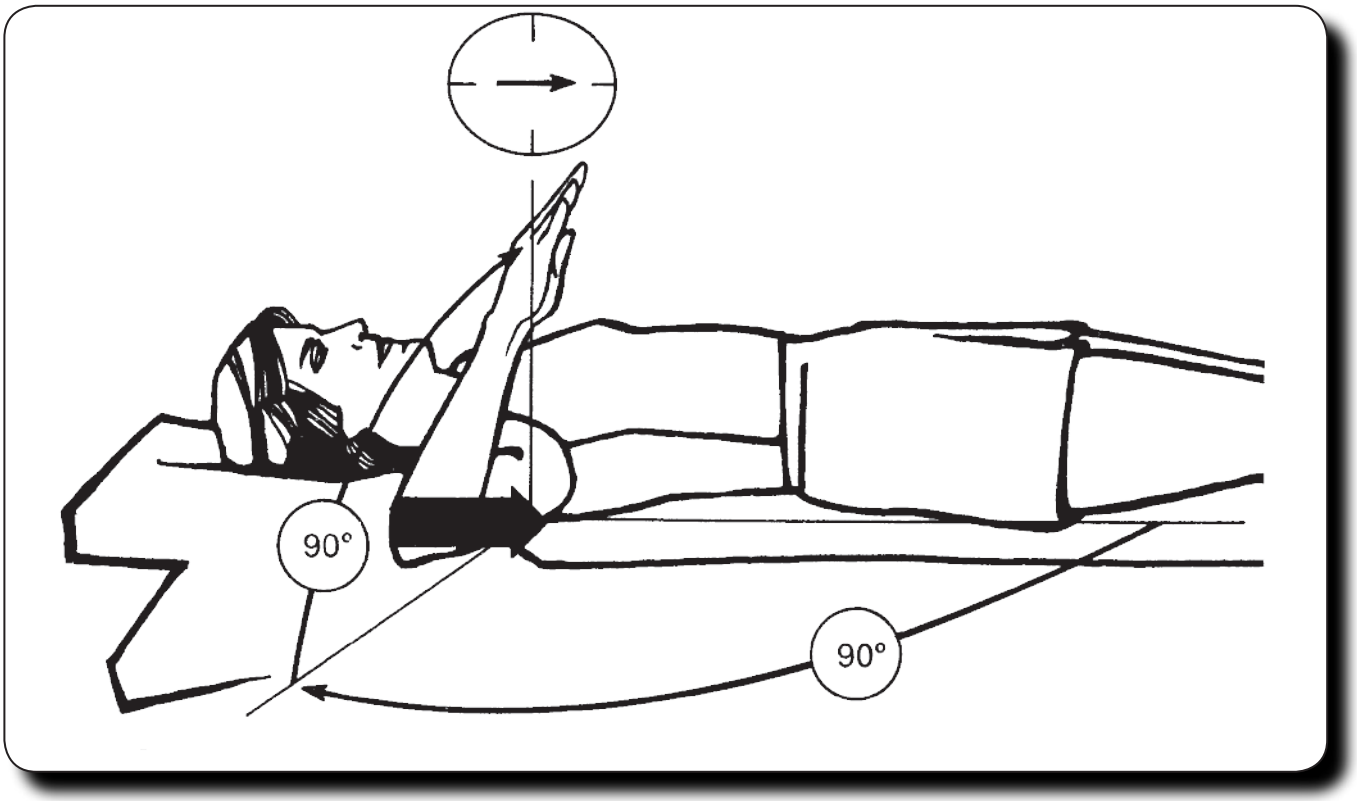
L. B. V.L. : L1L

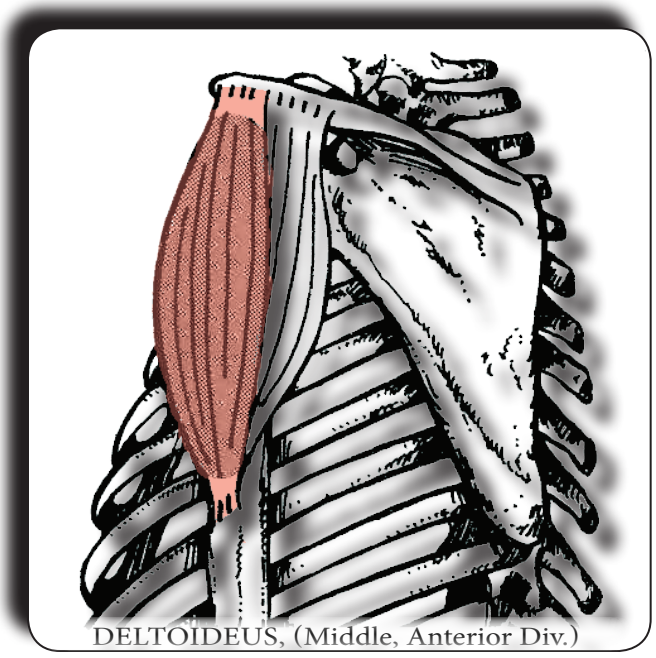
M. M. : C6

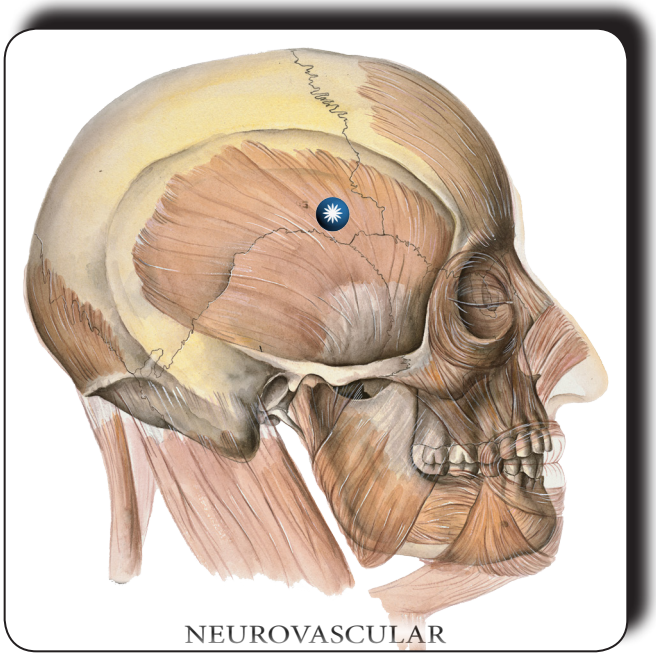
CRANIAL: Zygoma

FOOT: 3rd Cuneiform and Metatarsal

NUTRIENT SOURCE:




DELTOIDEUS, (Middle, Anterior Div.)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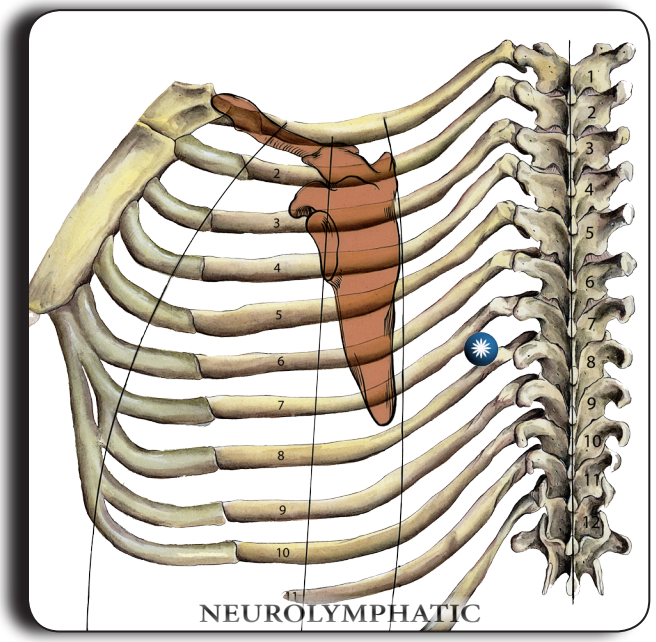

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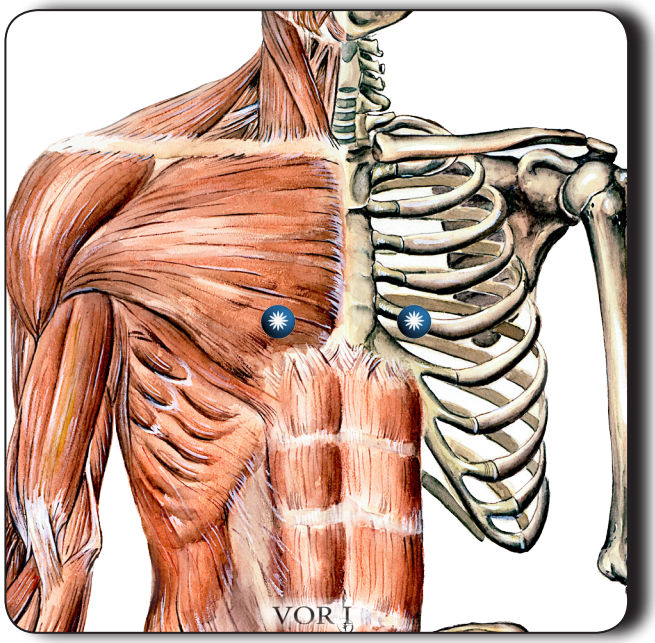
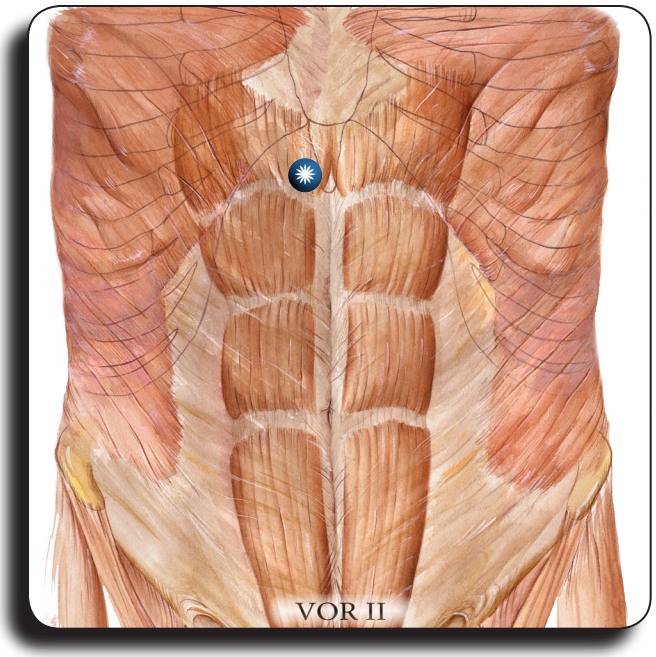
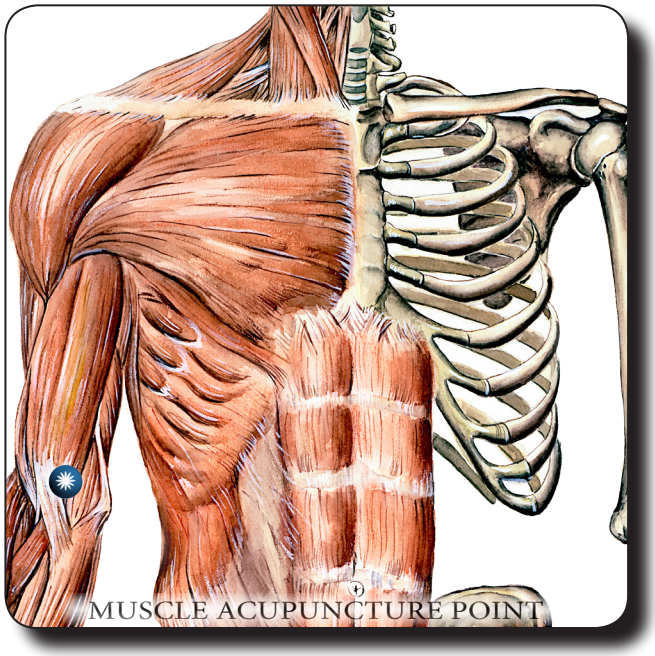

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 454: DELTOIDEUS, (Middle, Anterior Division)

ORIGIN: Upper surface of acromion process.

INSERTION: Deltoid tuberosity of humerus.

ACTION: Abducts arm on shoulder.
NOTE: Elbow should be relaxed and flexed 90 degrees.

TEST:

Patient: Supine. With elbow flexed 90 degrees, abduct arm on shoulder 90 degrees with slight external rotation. Hand should be above the level of the shoulder.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Superior surface of elbow to adduct humerus through coronal plane.

NEUROVASCULAR: (Lat) Parietal bone, lateral aspect, superior to squamosal suture and posterior to coronal suture.

NEUROLYMPHATIC: (Post/L) 7th ICS, 2" from spine.

VISCERAL ORGAN:

I. *Lungs:* (Ant/BL) Ribcage, anterior aspect, 5th costocartilage junction.

II. *Gallbladder:* (Ant/R) Rectus Abdominis, 4th section. medial border Xiphoid process.

M. A. P. : Cx2.75

V.L. : T8R

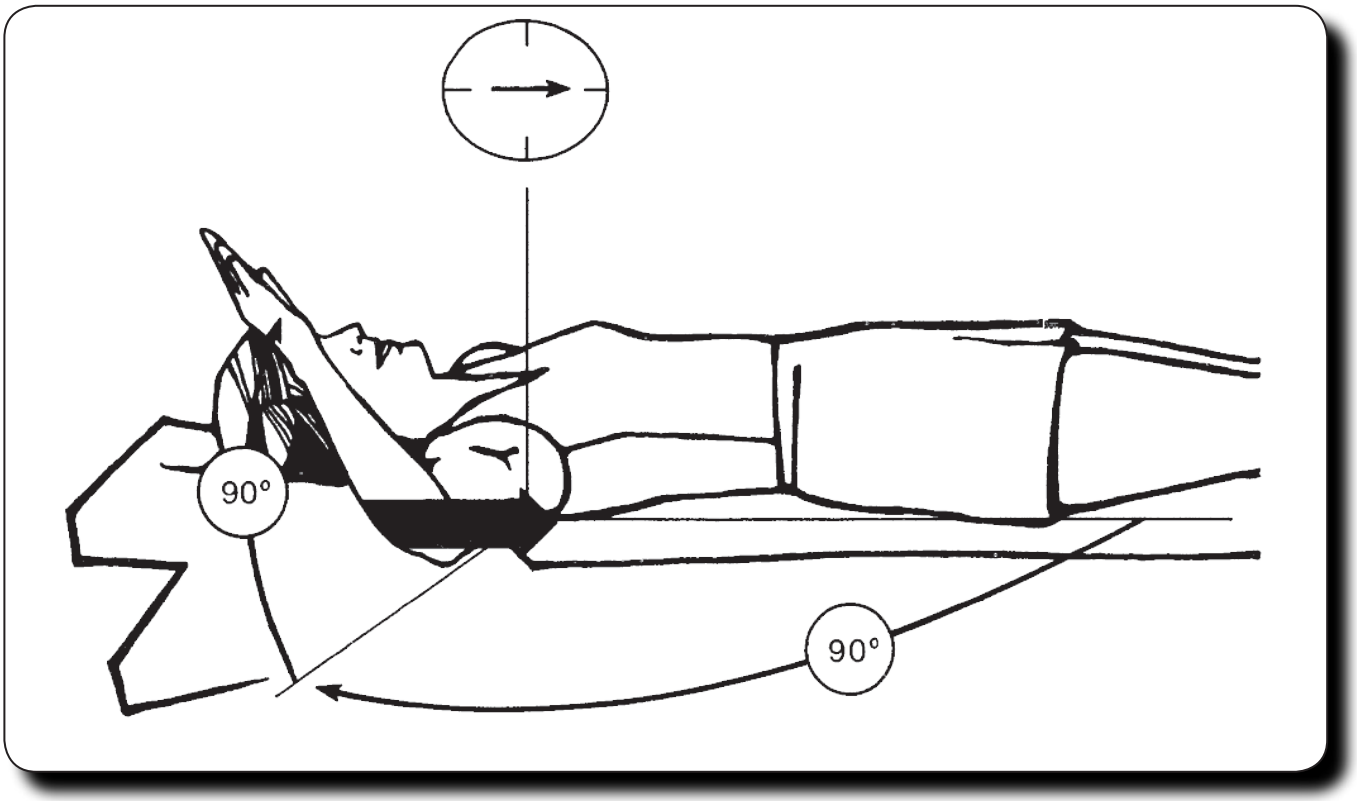
L. B. V.L. : T3R

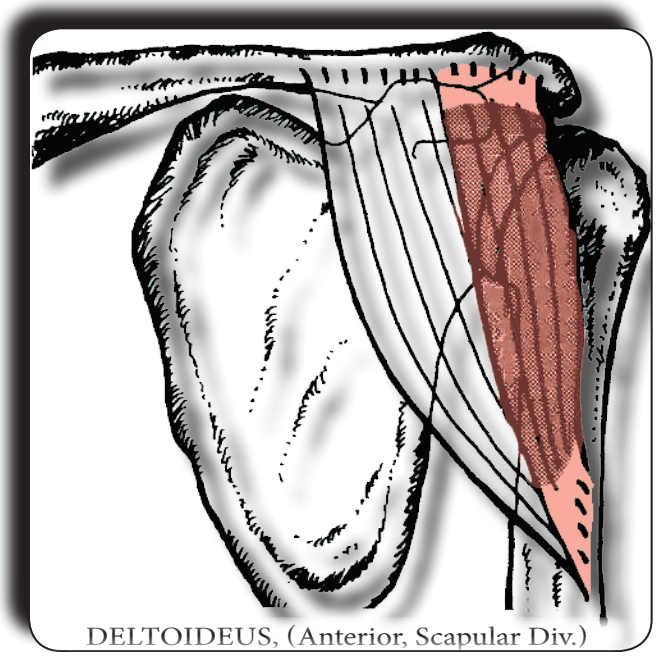
M. M. : C6

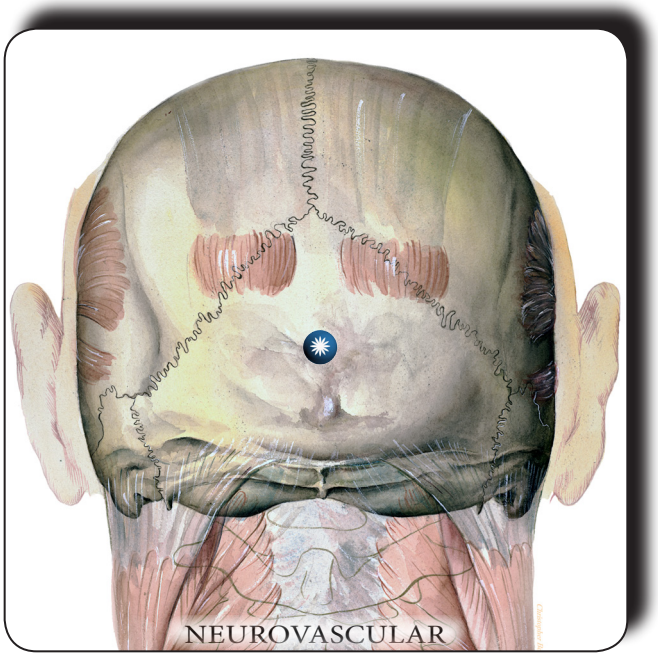
CRANIAL: Glabella

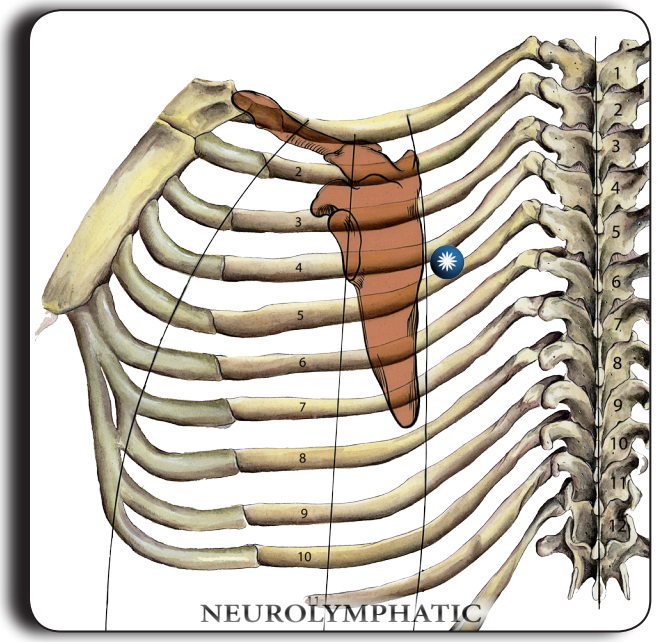
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. G Complex (S)

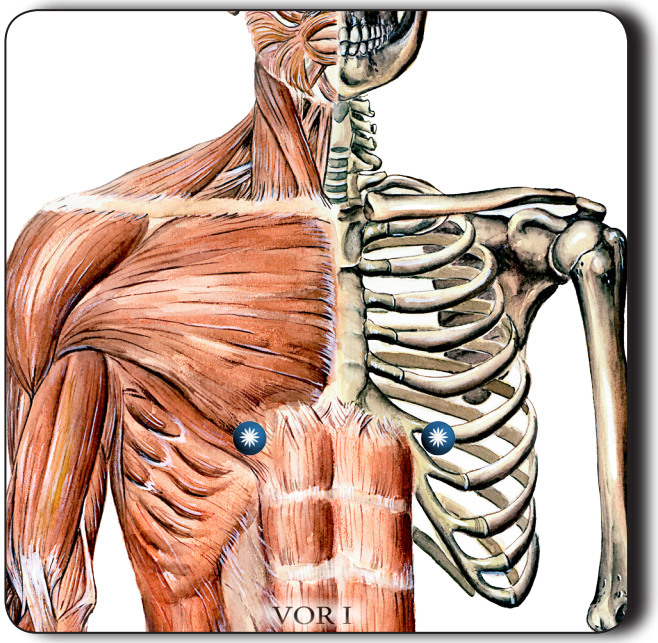


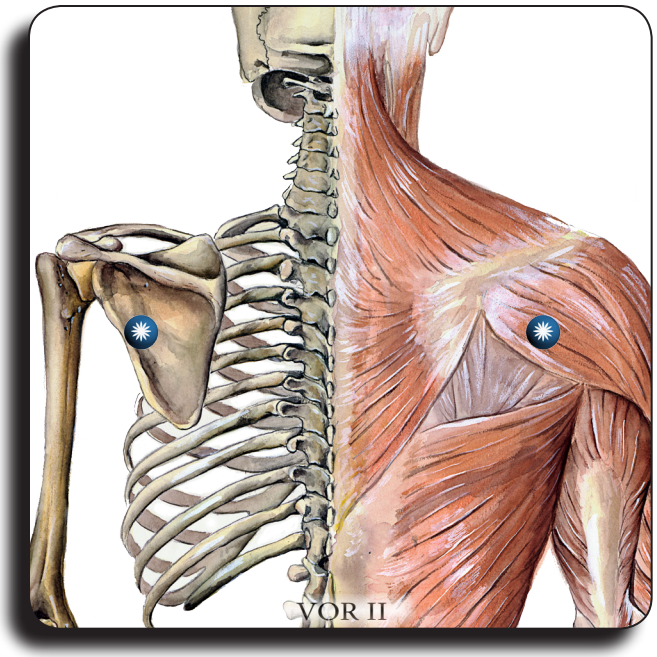

DELTOIDEUS, (Anterior, Scapular Div.)

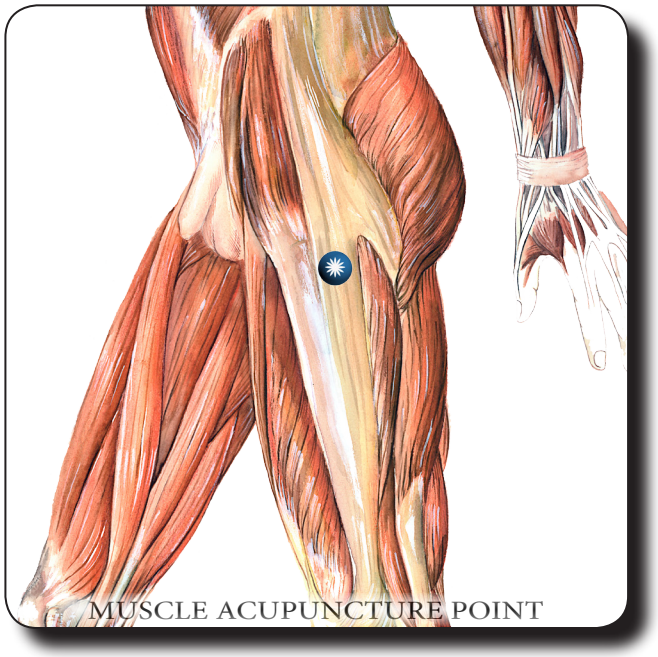

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 456: DELTOIDEUS, (Anterior, Scapular Division)

ORIGIN: Most anterior lateral surfaces of clavicle and acromion process of scapula.

INSERTION: Deltoid tuberosity of humerus.

ACTION: Abducts, flexes and internally rotates arm on shoulder.

TEST:

Patient: Supine. With elbow flexed 90 degrees, flex arm 75 degrees and abduct 45 degrees. Slightly internally rotate arm 10 degrees.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder..
Contact: Ipsilateral elbow to adduct and slightly extend arm obliquely on shoulder.

NEUROVASCULAR: (Post/Midline) Occipital bone, midline between posterior fontanelle and exterior occipital protuberance.

NEUROLYMPHATIC: (Post/L) 4th ICS, at vertebral border of scapula.

VISCERAL ORGAN:

I. *Lungs:* (Ant/BL) Ribcage, anterior aspect, 6th costocartilage junction.

II. *Adrenals:* (Post/BL) Scapula, Infraspinatus fossa, Si10.5, near superior aspect of axillary border.

M. A. P. : G30.5

V.L. : L2L

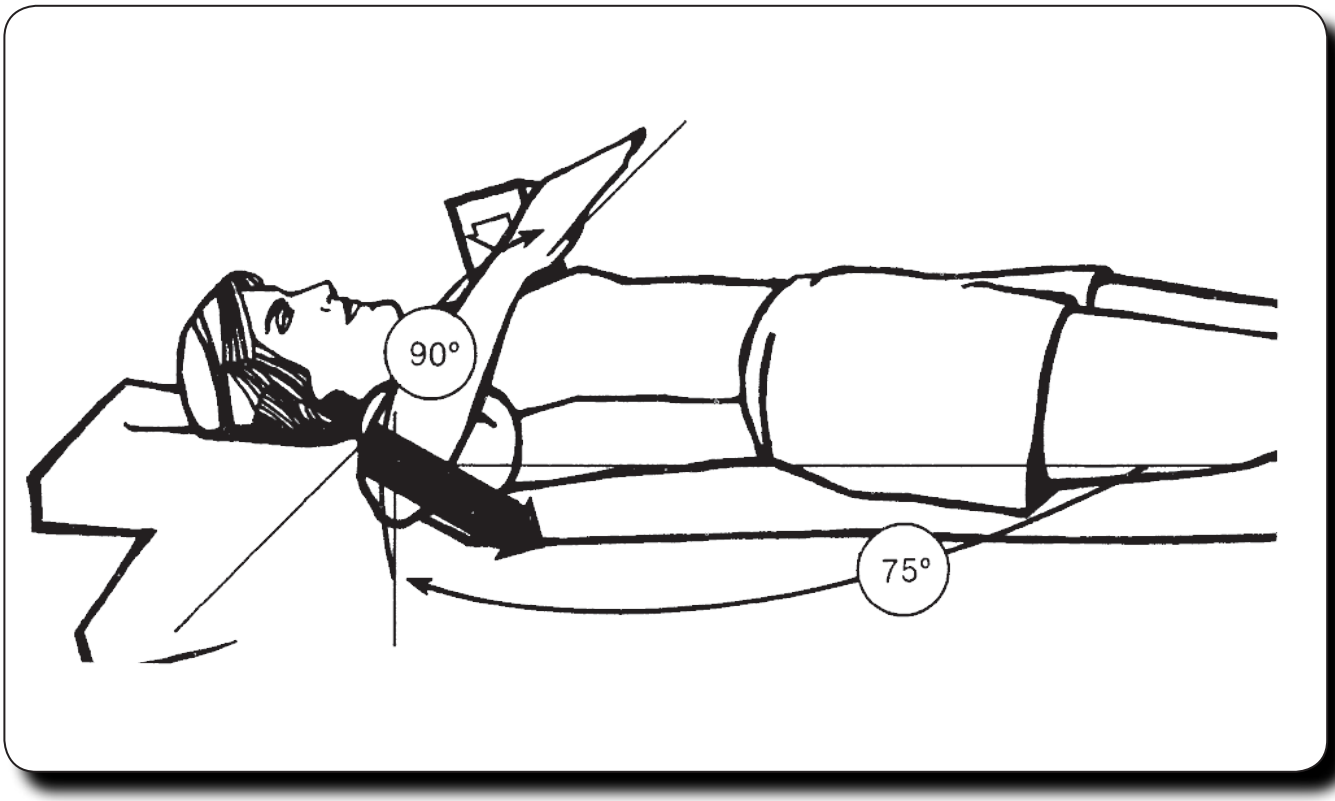
L. B. V.L. : C4L

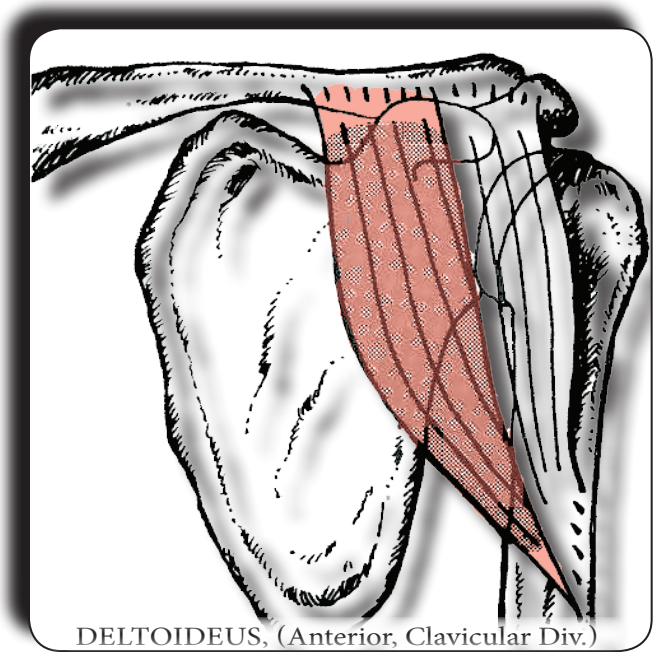
M. M. : C5

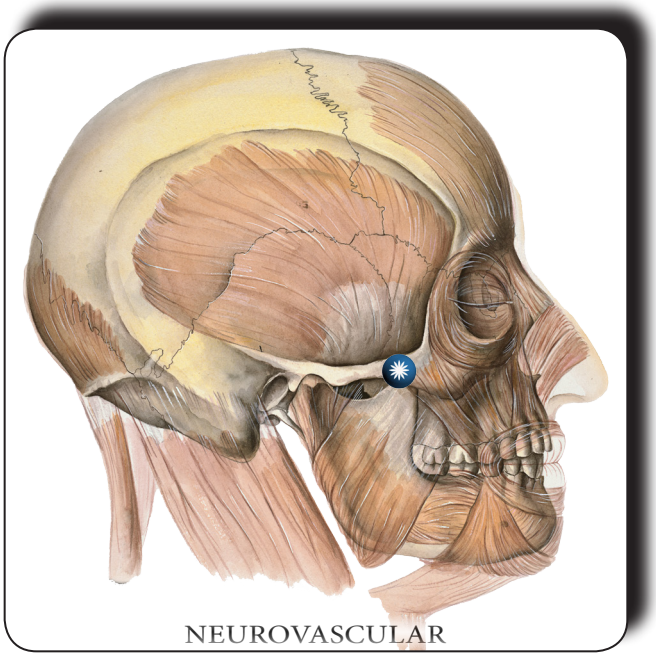
CRANIAL: None

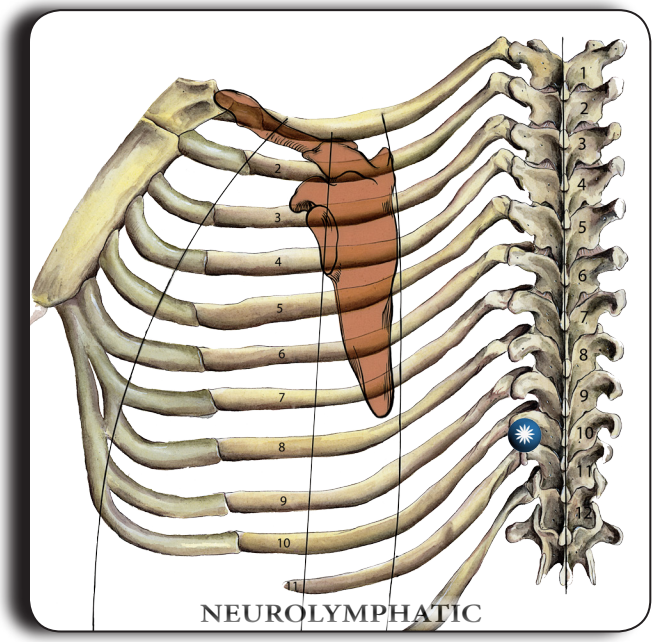
FOOT: None

NUTRIENT SOURCE:
l. Vitamin B (S)

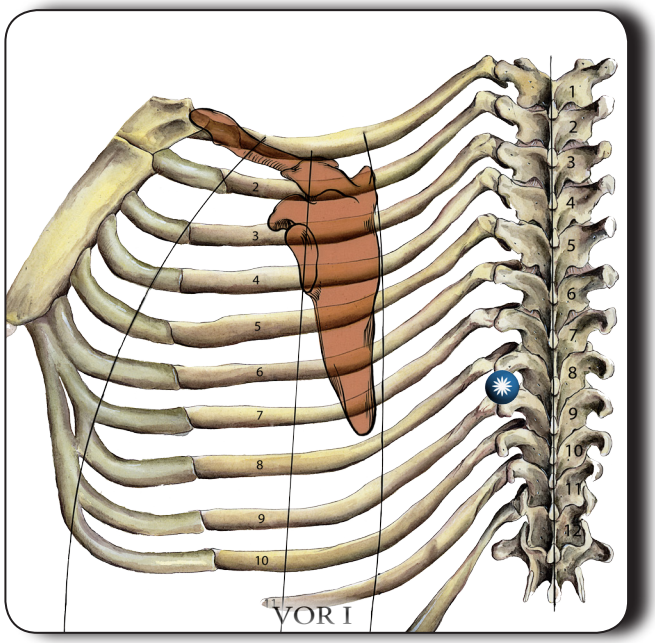



DELTOIDEUS, (Anterior, Clavicular Div.)

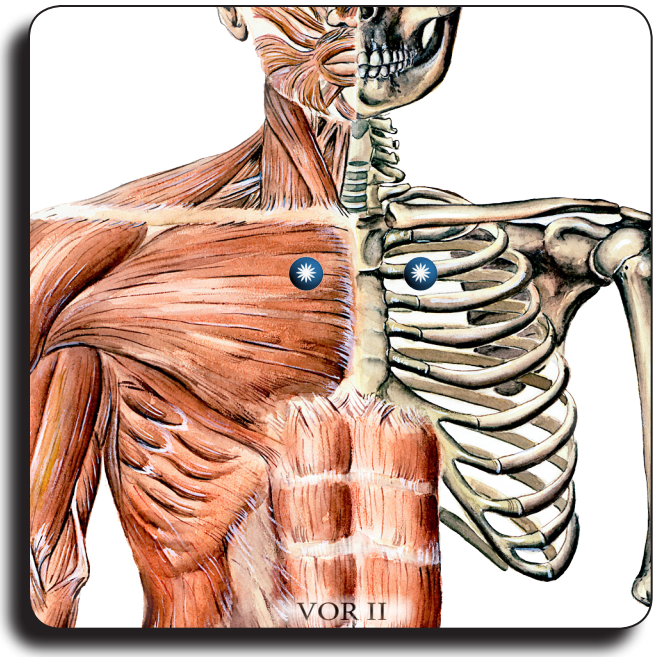

NEUROVASCULAR

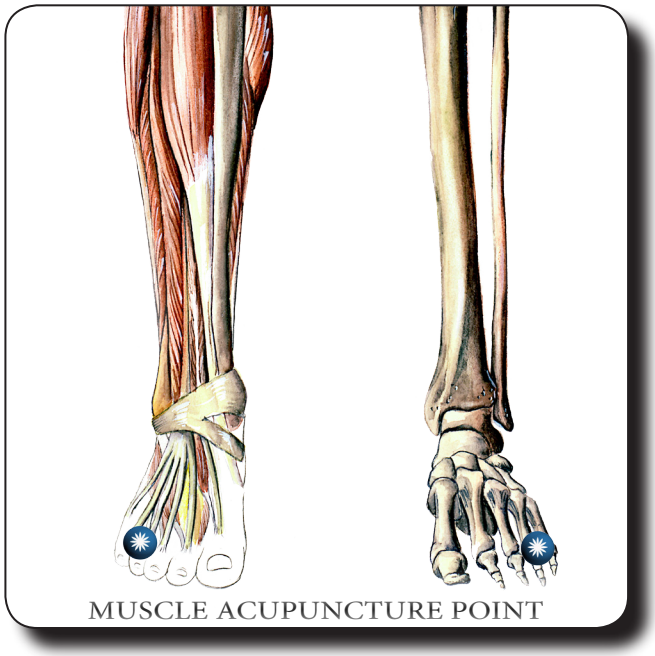


NEUROLYMPHATIC



VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 458: DELTOIDEUS, (Anterior, Clavicular Division)

ORIGIN: Anterior border and upper surfaces of lateral half of clavicle.

INSERTION: Deltoid prominence, most anterior medial aspect.

ACTION: Abducts, flexes and internally rotates arm on shoulder.

TEST:

Patient: Supine. With elbow flexed 90 degrees, flex arm 75 degrees, abduct 45 degrees and externally rotate arm 23 degrees..

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Ipsilateral shoulder to adduct and slightly extend arm obliquely on shoulder.

NEUROVASCULAR: (Lat) Cranium, lateral aspect, zygomatic temporal suture.

NEUROLYMPHATIC: (Post/L) 10th ICS, at spine.

VISCERAL ORGAN:

I. *Stomach:* (Post/BL) Ribcage, posterior aspect, 8th ICS at transverse process B17.

II. *Lungs:* (Ant/BL) Ribcage, 2nd costocartilage junction.

M. A. P. : G43

V.L. : L4L

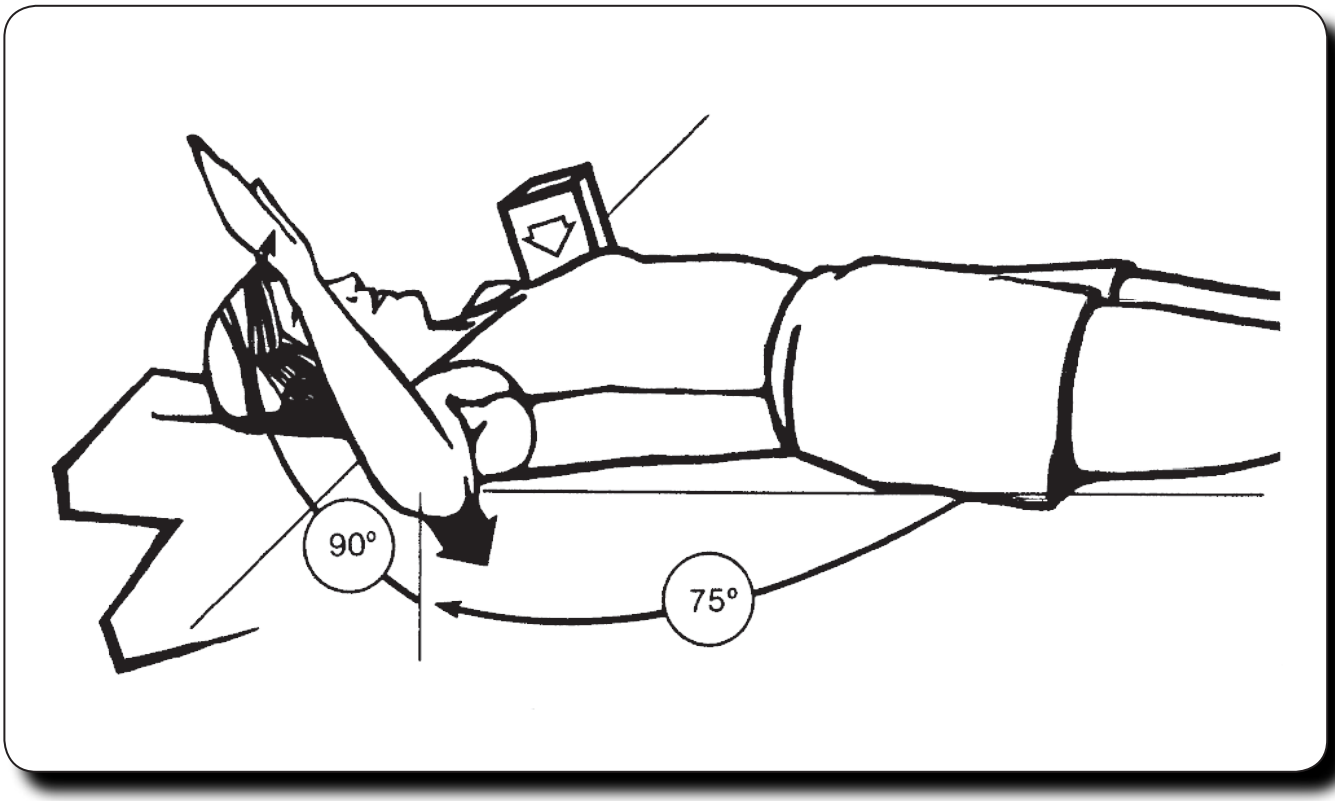
L. B. V.L. : C2L

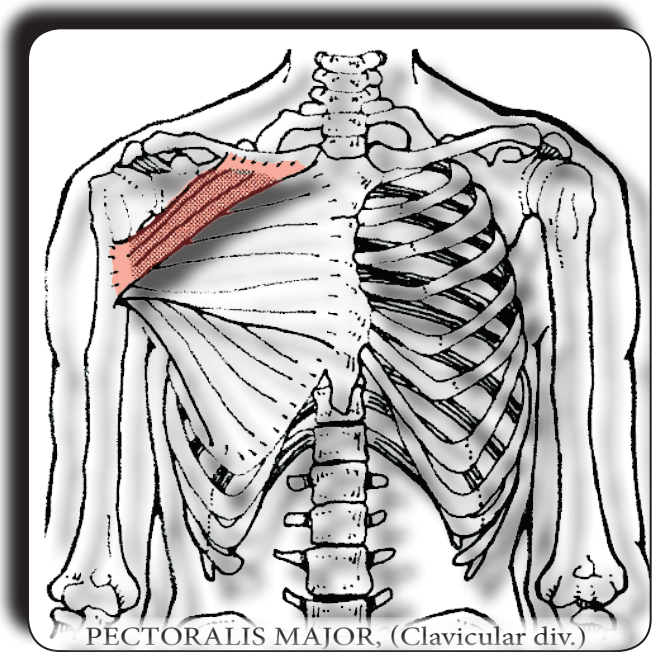
M. M. : C6

CRANIAL: Zygoma

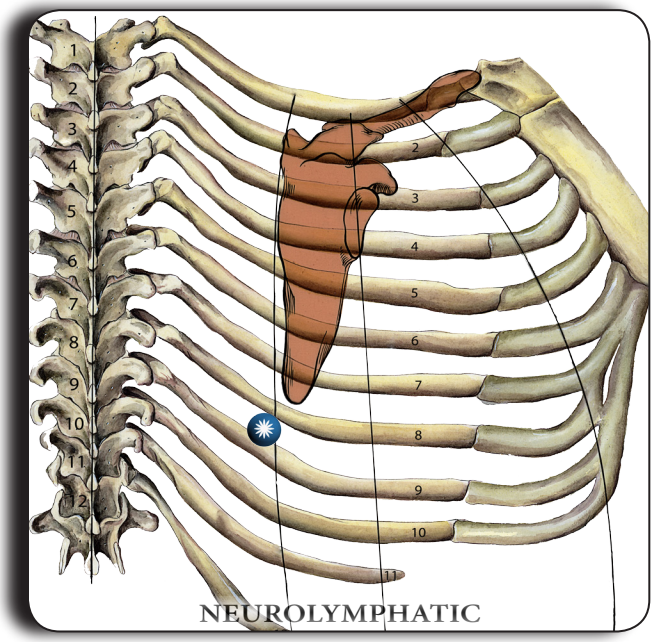
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. AF Betafood (S)

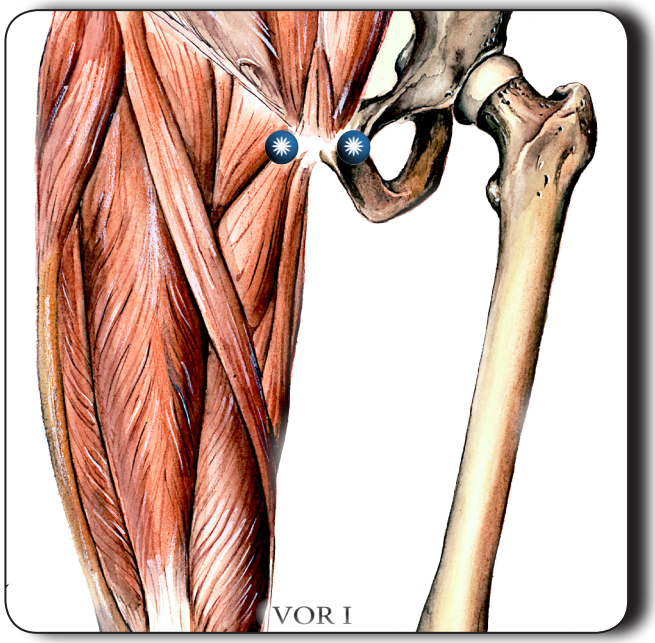


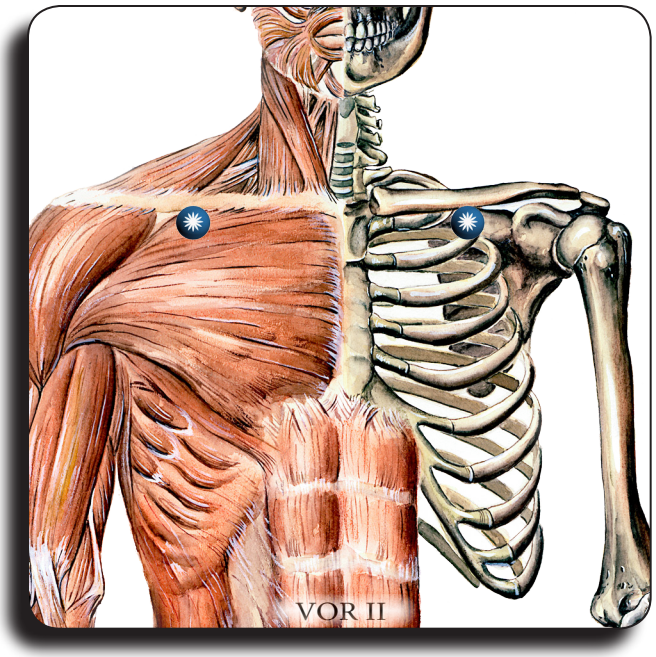

PECTORALIS MAJOR, (Clavicular div.)

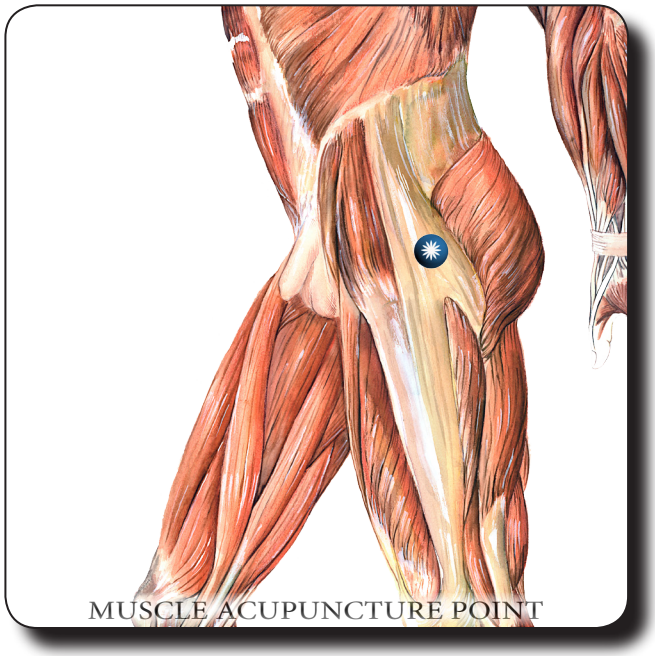
NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 460: PECTORALIS MAJOR, (Clavicular Division)

ORIGIN: Medial third of the anterior surface of the clavicle.

INSERTION: Lower lateral aspect of the bicipital groove.

ACTION: Flexes, adducts and internally rotates the arm.

TEST:

Patient: Supine. Flex and internally rotate arm on shoulder 90 degrees.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Ipsilateral forearm on the dorsum surface to extend and abduct arm in an oblique plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, at its eminence.
Note: Discovered by Dr. George Goodheart.

NEUROLYMPHATIC: (Post/R) 8th ICS, 4" lateral to spine .

VISCERAL ORGAN:

I. *Prostate/Uterus:* (Ant/BL) Pelvis, Pubic area, K10.8, level with inferior border of pubes.

II. *Heart:* (Ant/BL) mid-clavicular area, inferior surface of clavicle, junction of 1st rib, St13.

M. A. P. : G30

V.L. : C5R

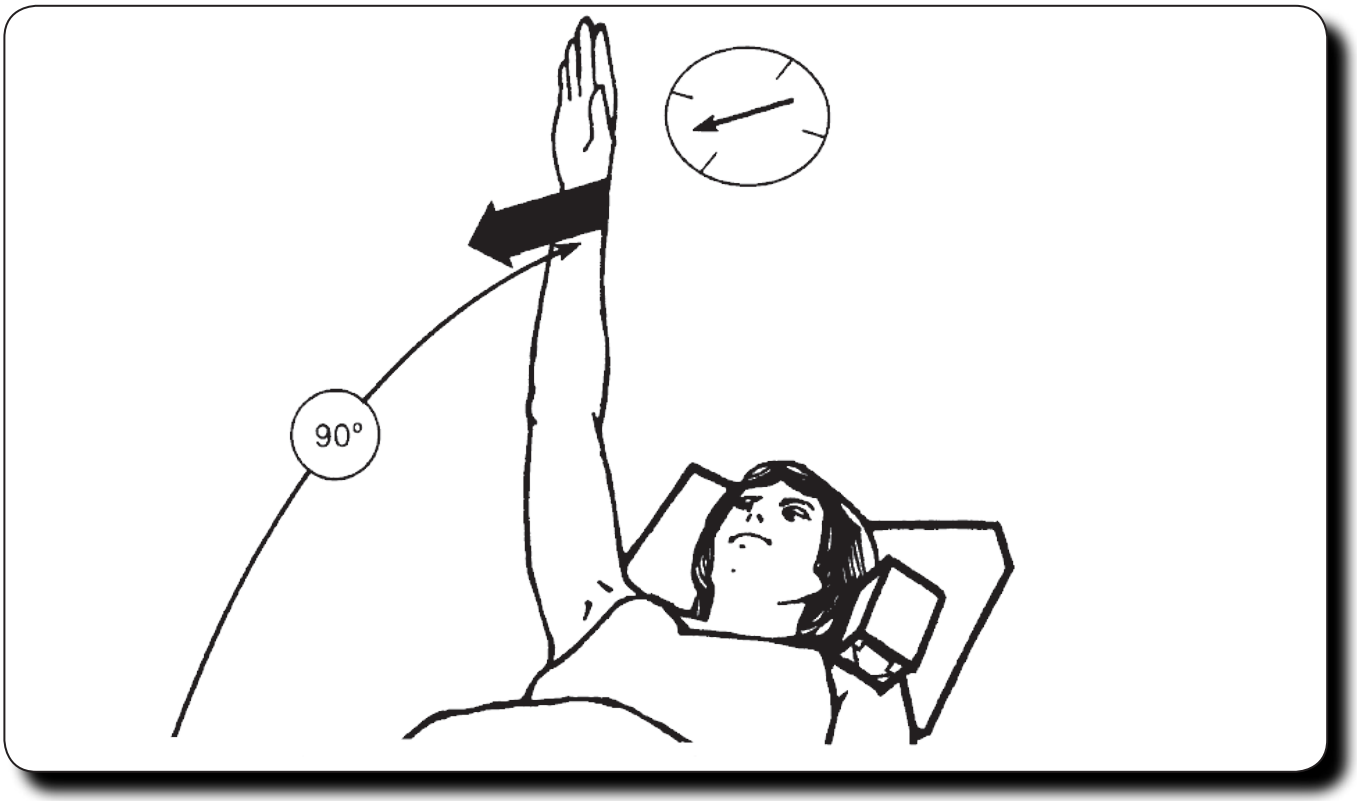
L. B. V.L. : L1R

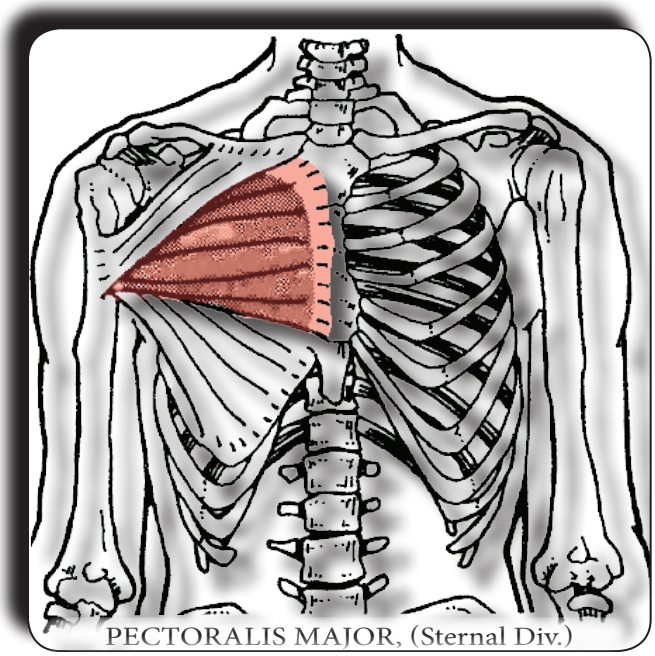
M. M. : C7

CRANIAL: Parietal

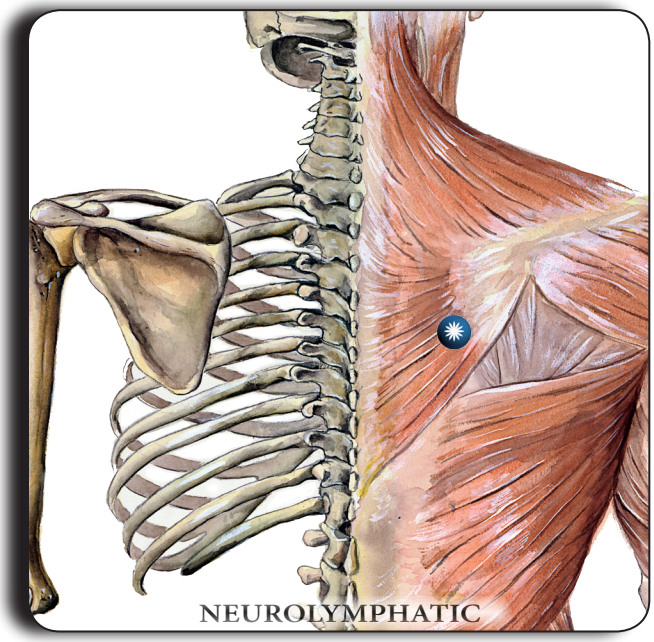
FOOT: Talus

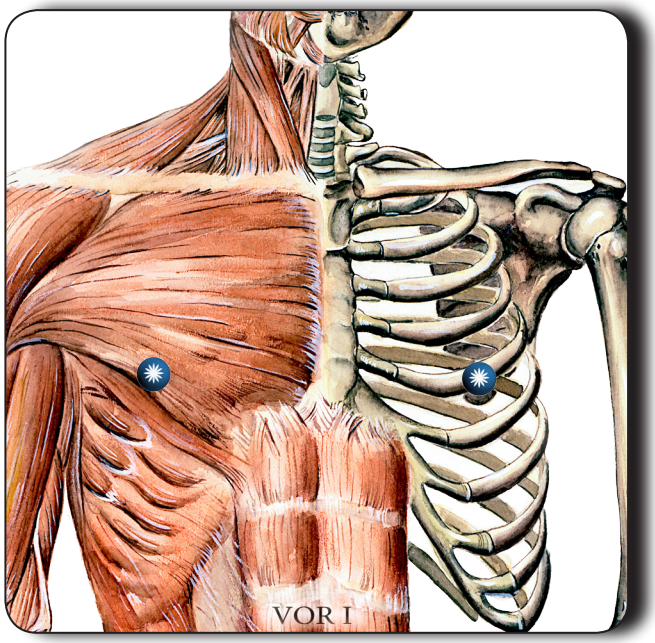
NUTRIENT SOURCE:
1. Cardiotrophin (S)

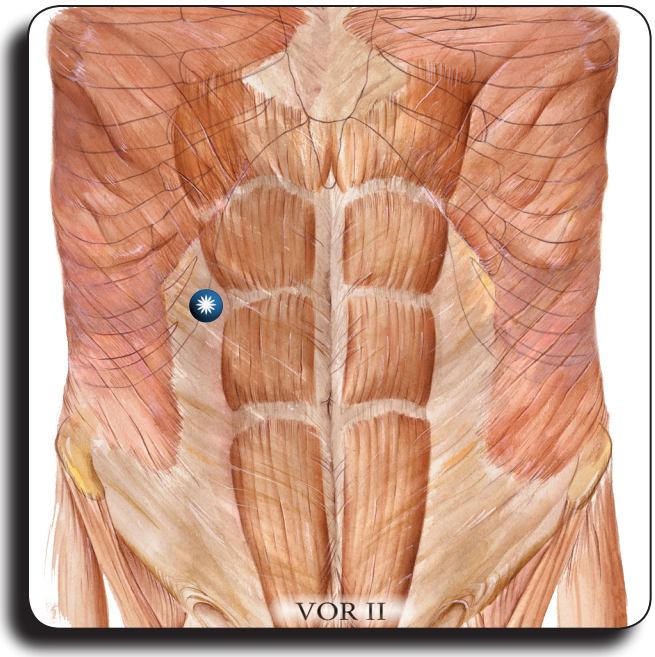


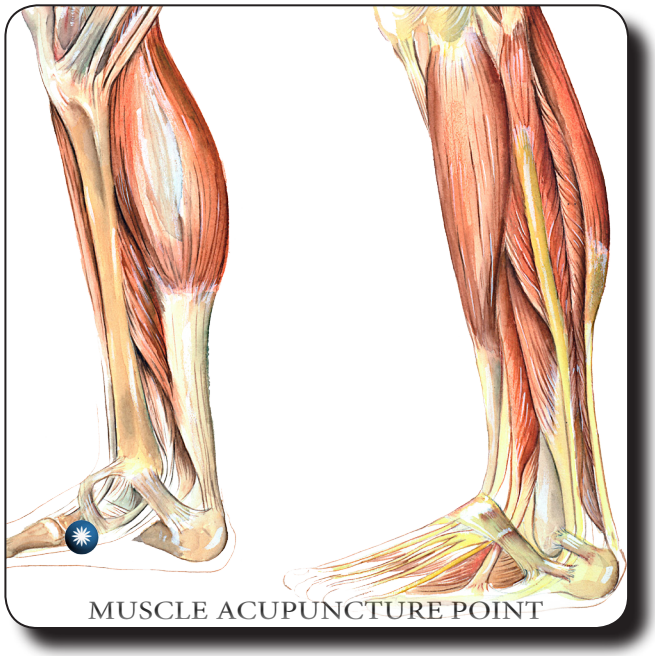

PECTORALIS MAJOR, (Sternal Div.)

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 462: PECTORALIS MAJOR, (Sternal Division)

ORIGIN: From the anterior surface of sternum and cartilages of the 1st to the 6th ribs.

INSERTION: Crest of greater tubercle of the humerus, proximal medial surface of humerus.

ACTION: Draws the arm into slight flexion while its primary action is adduction and internal rotation of the arm.

TEST:

Patient: Supine. Flex arm on shoulder 90 degrees. Internally rotate, adduct and extend arm 20 degrees toward midline with hand directed toward opposite ASIS.

Doctor: Position: Ipsilateral.
Brace: Contralateral shoulder.
Contact: Ipsilateral forearm to flex and abduct arm through an oblique plane toward ipsilateral shoulder.

NEUROVASCULAR: (Ant/BL) Frontal bone, at hairline, superior to eyes.
(Note: Discovered by Dr. George Goodheart.)

NEUROLYMPHATIC: (Post/R) 6th ICS, 3" lateral to spine.

VISCERAL ORGAN:

I. *Mammary Tissue:* (Ant/BL) Ribcage, lateral aspect on nipple.

II. *Liver:* (Ant/R) Abdomen, just superior to tip of 9th rib.

M. A. P. : Sp4.3

V.L. : T8L

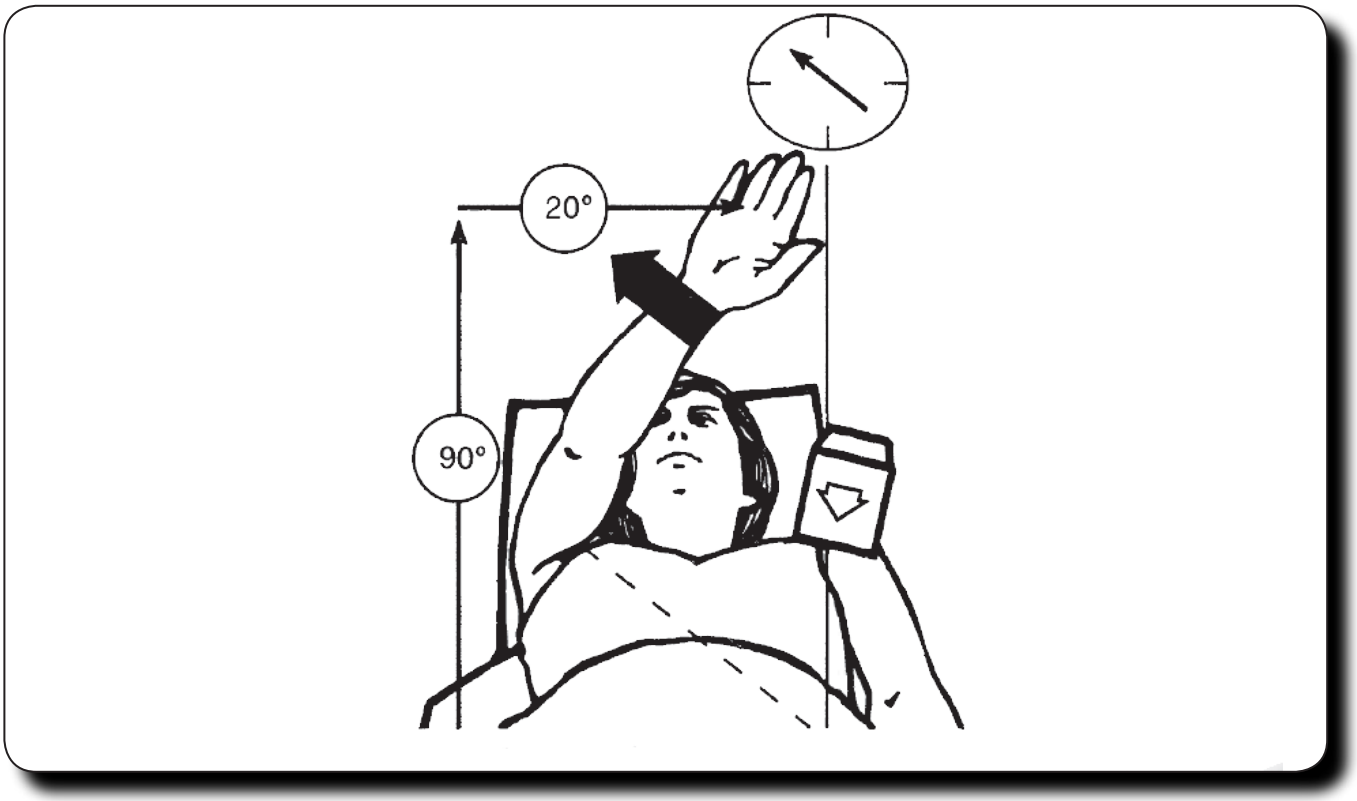
L. B. V.L. : T3L

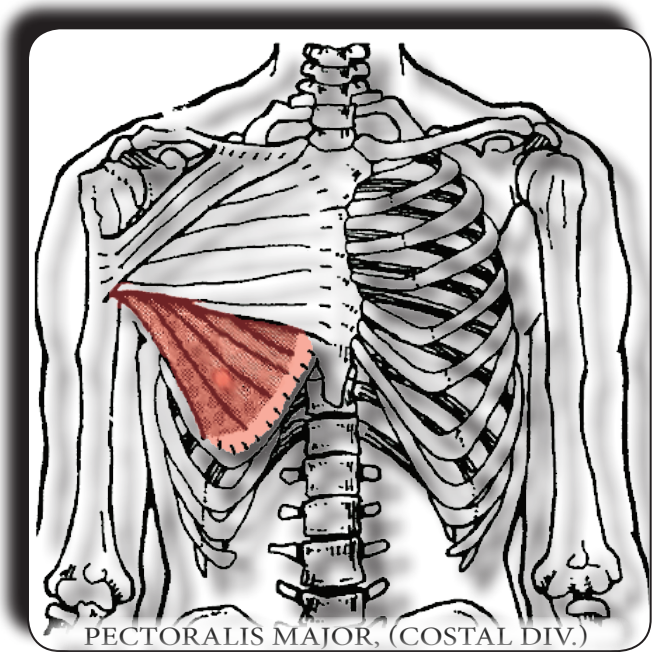
M. M. : T1

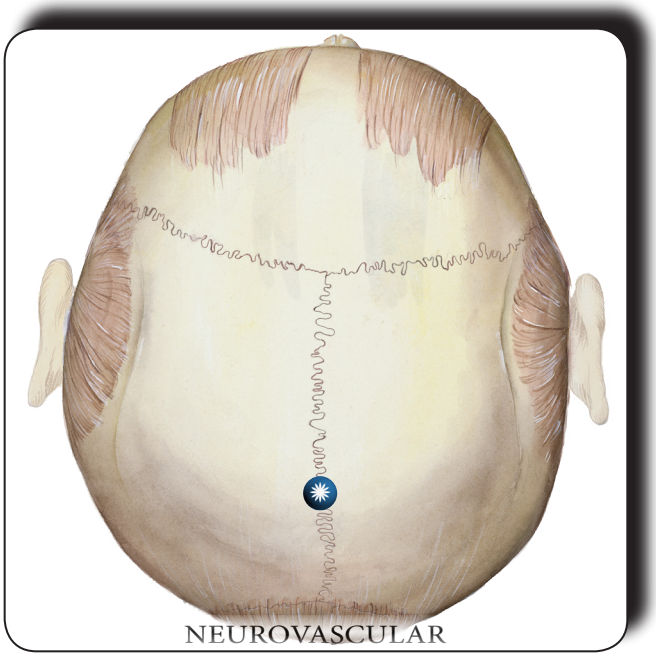
CRANIAL: Frontal

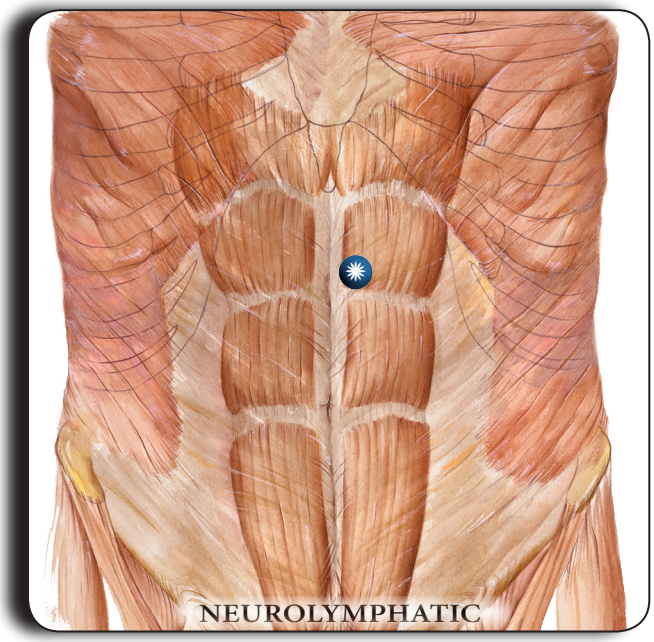
FOOT: Navicular

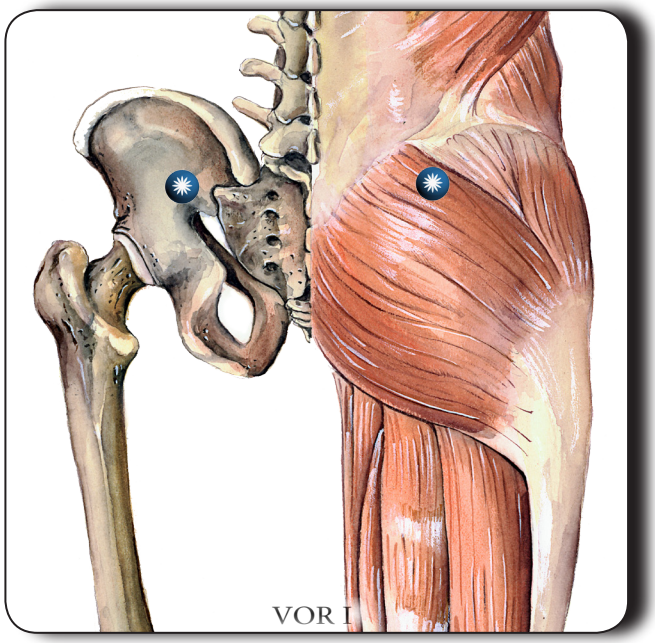
NUTRIENT SOURCE:
1. Vitamin B (S)

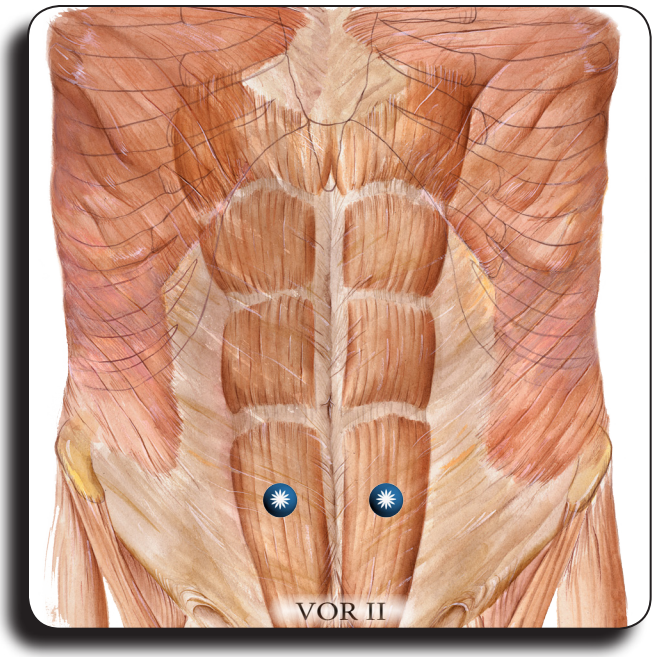


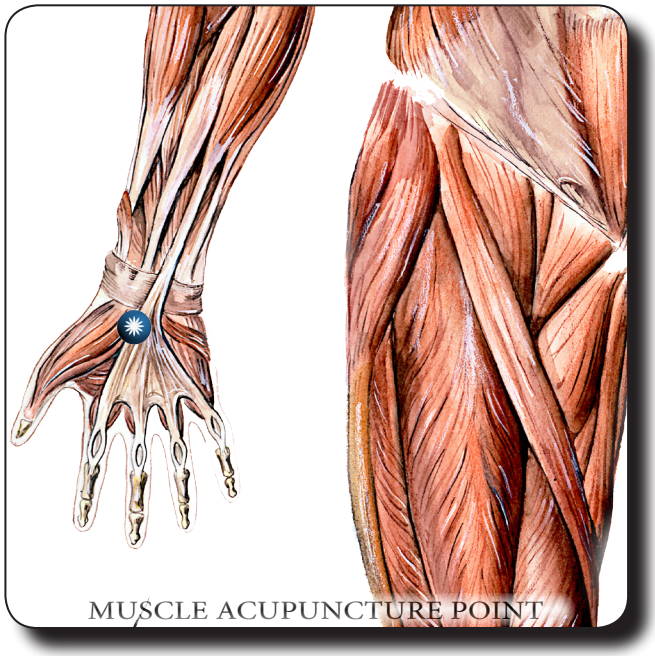

PECTORALIS MAJOR, (COSTAL DIV.)


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 464: PECTORALIS MAJOR, (Costal Division)

ORIGIN: Aponeurosis of external oblique muscle and cartilage of the 6th and 7th ribs.

INSERTION: Outer bicipital ridge of humerus.

ACTION: Adducts and internally rotates humerus while drawing it forward into flexion. Acts to draw the shoulder girdle downward and forward.

TEST:

Patient: Supine. Flex arm on shoulder 90 degrees. Internally rotate and adduct and extend ipsilateral arm 10 degrees toward midline.

Doctor: Position: Ipsilateral.
Brace: Contralateral Shoulder.
Contact: Ipsilateral forearm to flex arm through a sagittal plane.

NEUROVASCULAR: (Sup/Midline) Cranium, superior aspect, sagittal suture halfway between anterior and posterior fontanelle.

NEUROLYMPHATIC: (Ant/L) Rectus Abdominis, third section, near origin and linea alba K19.

VISCERAL ORGAN:

I. *Anterior Pituitary:* (Post/BL) Pelvis, posterior aspect, B47.75, 2" lateral to PSIS.

II. *Vaginal Vault:* (Ant/BL) Rectus Abdominis, first section, K15.

M. A. P. : Cx7

V.L. : C2L

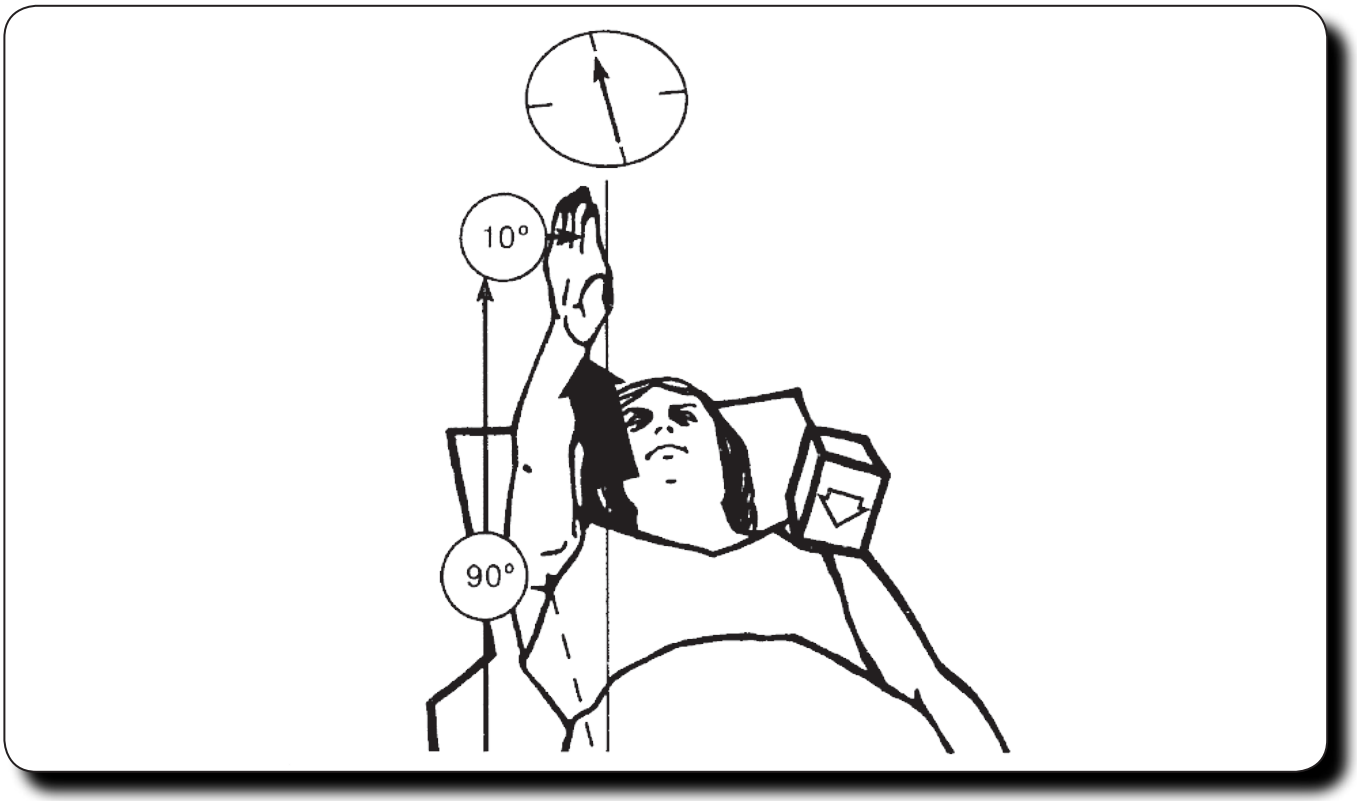
L. B. V.L. : L4L

M. M. : C7

CRANIAL: Temporal

FOOT: Cuboid

NUTRIENT SOURCE:



Section II:

Elbow and Forearm

Muscles Of The Upper Extremity That Insert On The Elbow And Forearm

Origin: Scapula

1. 466 Biceps Brachii Long Head
2. 468 Biceps Brachii Short Head
3. 407 Triceps, Long Head

Origin: Humerus (Posterior Aspect)

4. 472 Triceps, Lateral Head
5. 474 Triceps, Medial Head
6. 476 Articularis Cubiti

Origin: Humerus (Anterior Lateral Aspect)

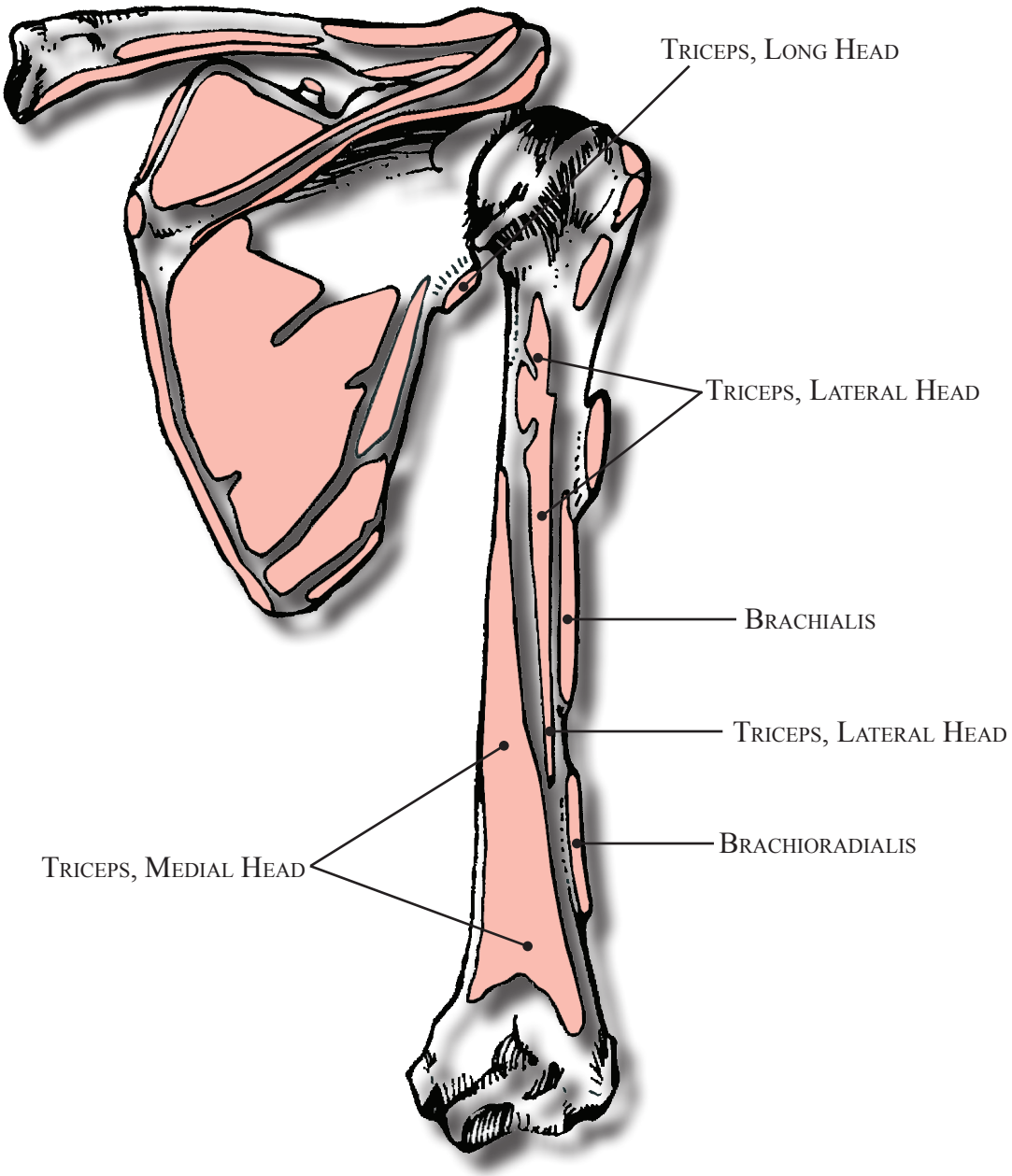
7. 478 Brachialis
8. 480 Brachioradialis, Humeral Division
9. 482 Brachioradialis, Septal Division
10. 484 Pronator Teres, Humeral Division

Origin: Forearm

11. 486 Pronator Teres, Ulnar Division
12. 488 Anconeus, Olecranon Division
13. 490 Anconeus, Ulnar Division
14. 492 Supinator, Radial Division
15. 494 Supinator, Ulnar Division
16. 496 Pronator Quadratus, Proximal Division
17. 498 Pronator Quadratus, Distal Division

Origin and Insertion

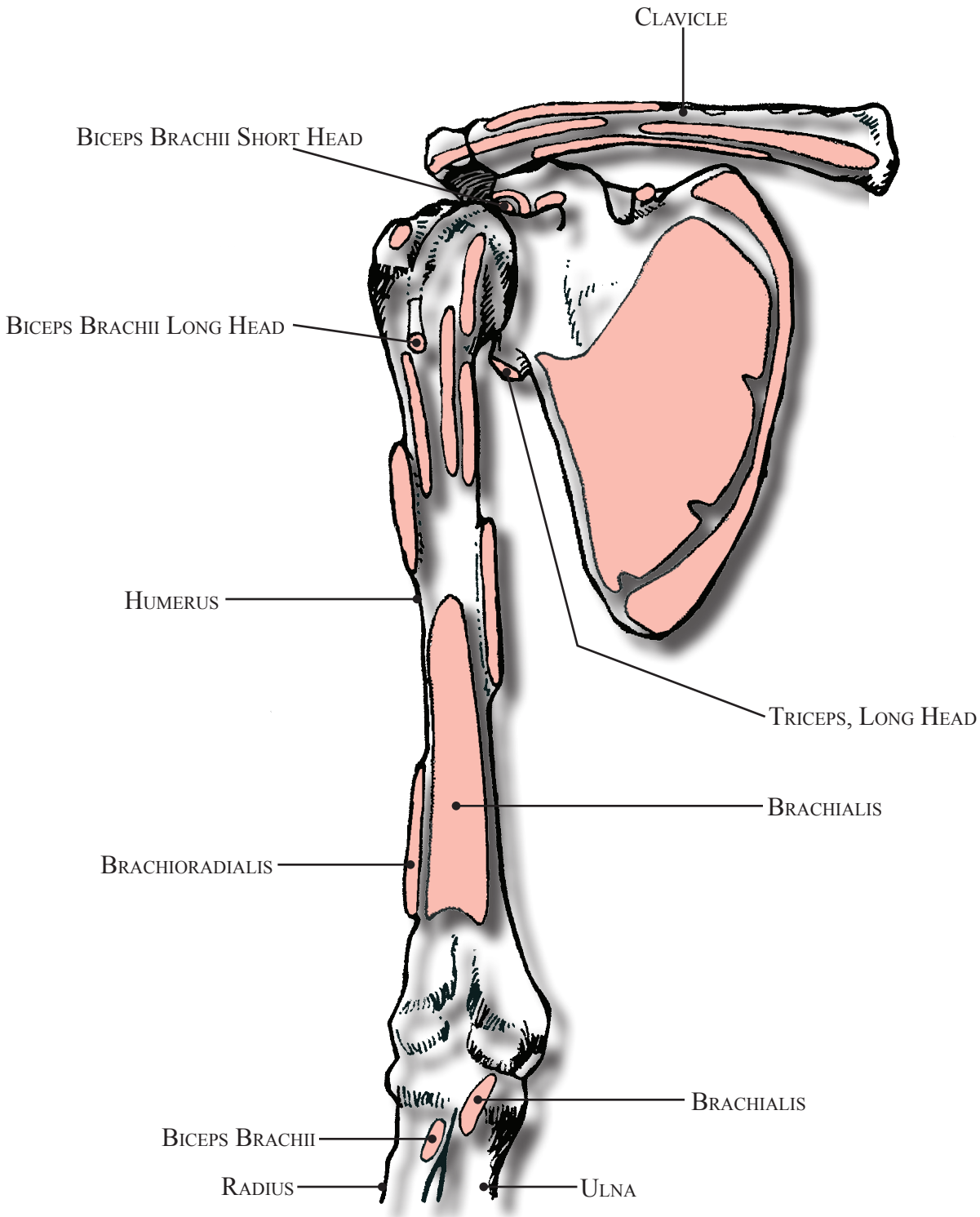
Elbow and Forearm Muscles



Posterior View of Right Shoulder

Origin and Insertion

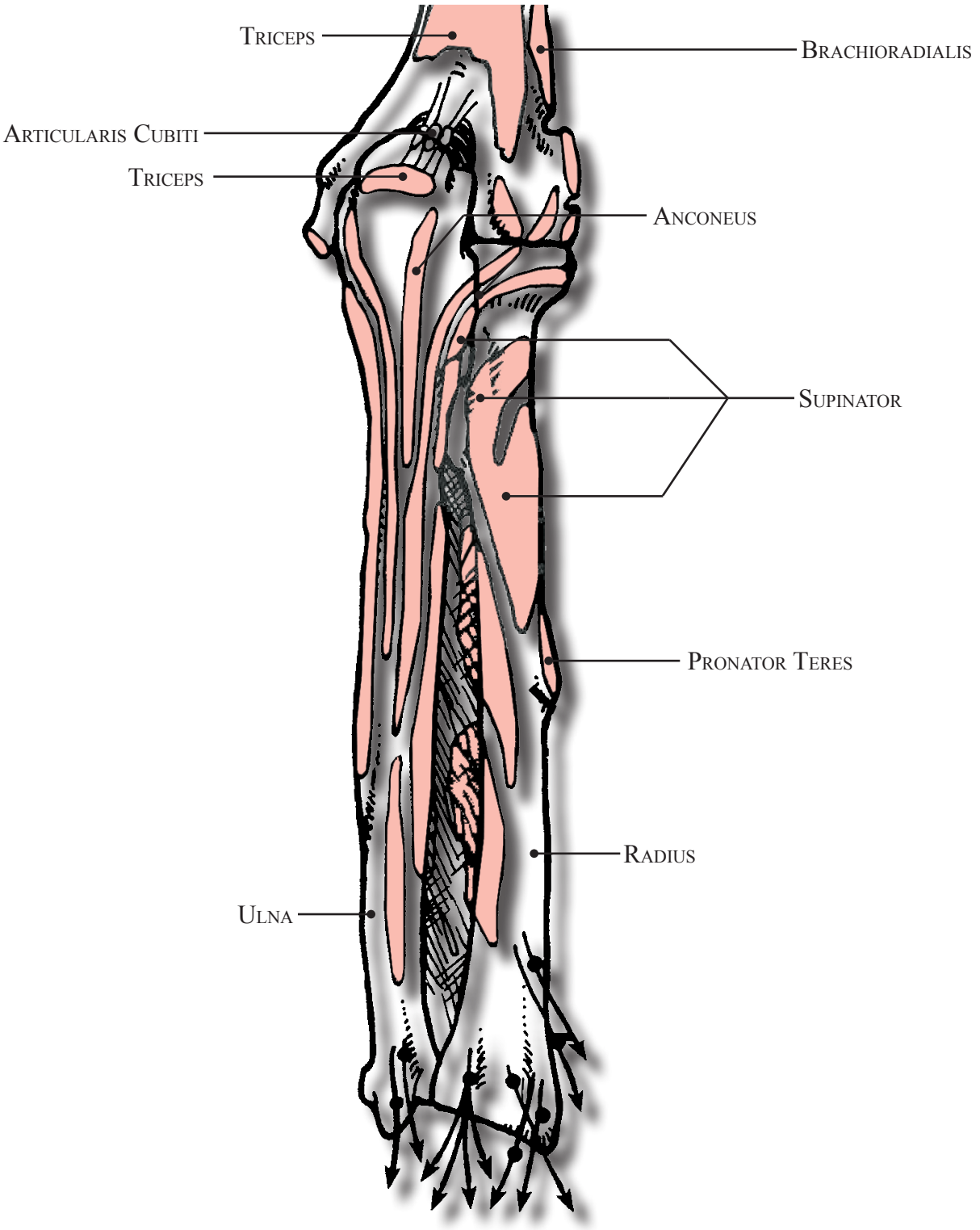
Elbow and Forearm Muscles



Anterior View of Right Shoulder

Origin and Insertion

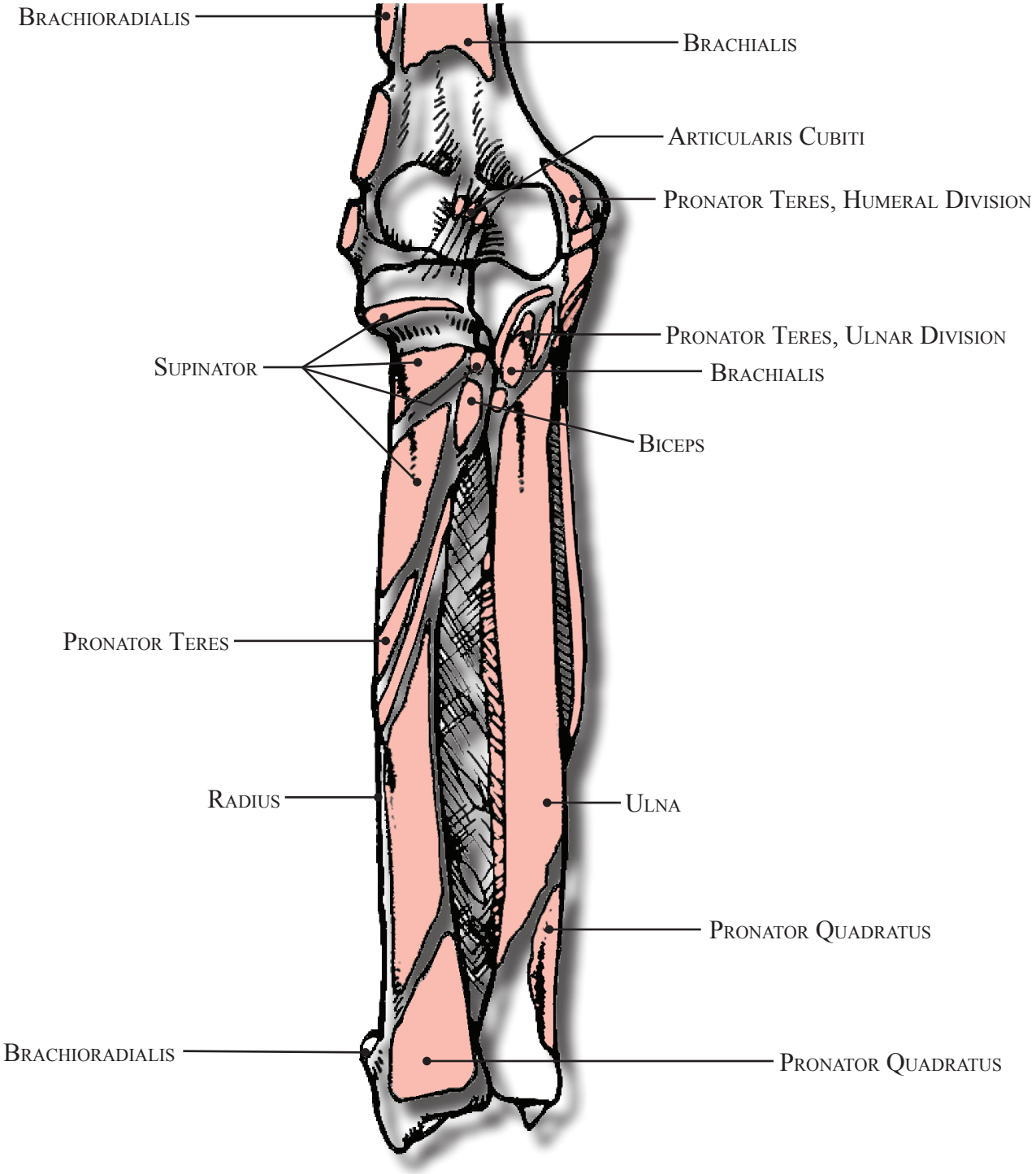
Elbow and Forearm Muscles



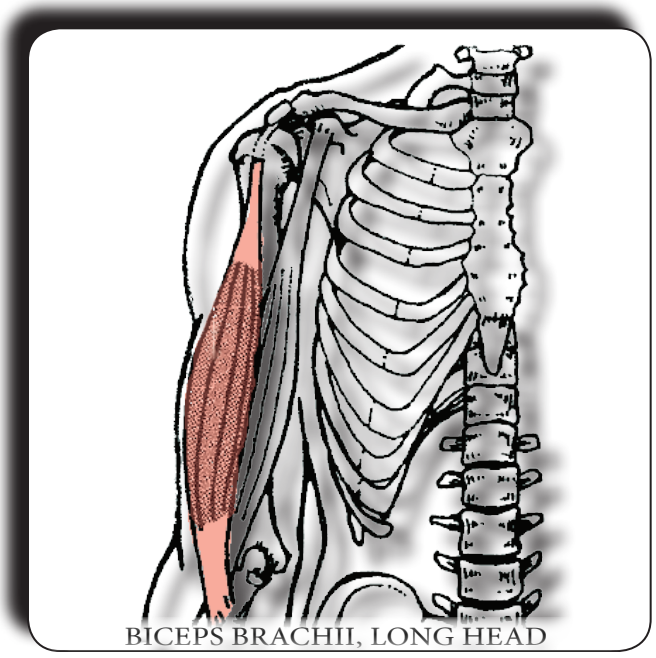
Posterior View of Right Forearm

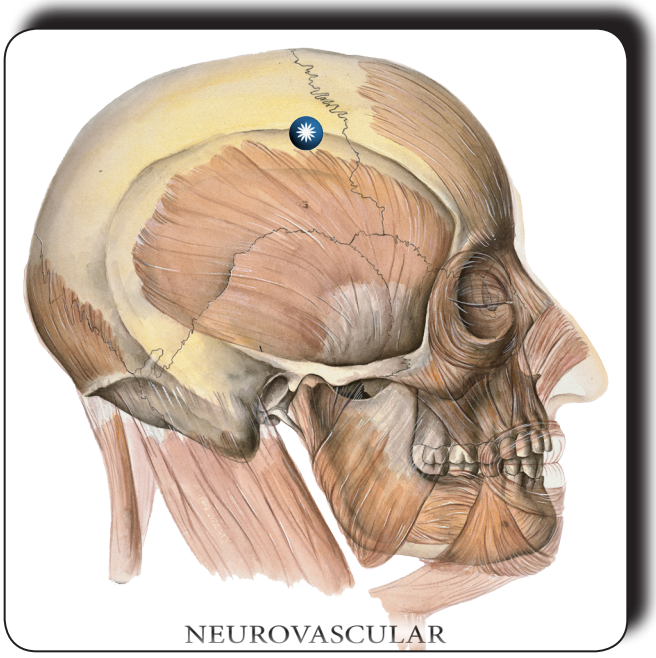
Origin and Insertion

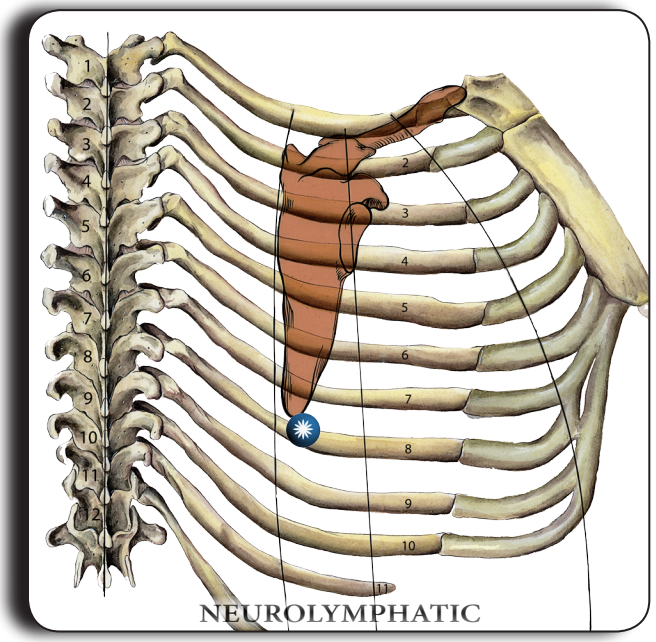
Elbow and Forearm Muscles



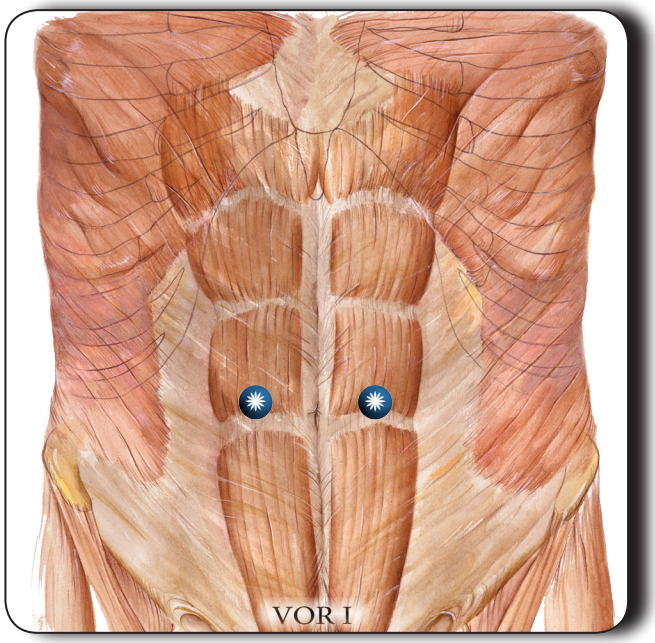
Anterior View of Right Forearm

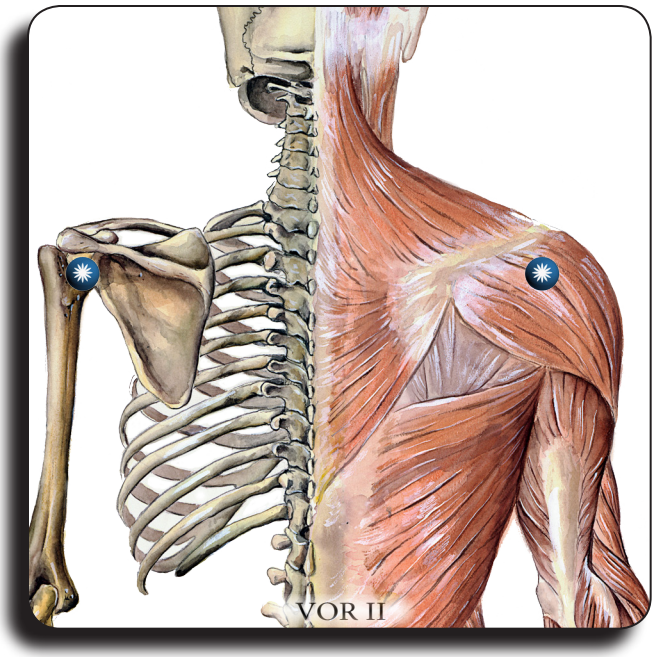

BICEPS BRACHII, LONG HEAD

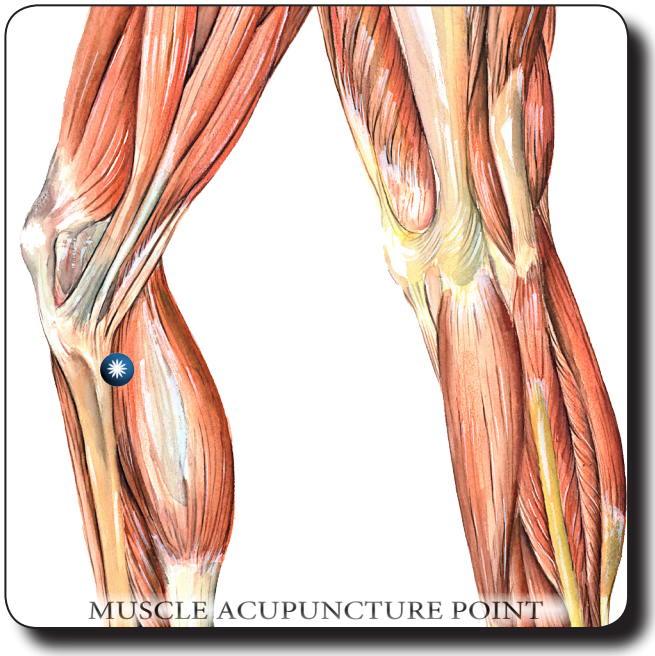

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 466: BICEPS BRACHII, LONG HEAD

ORIGIN: Supraglenoid tubercle of scapula.

INSERTION: Tuberosity of radius and lacertus fibrosus.

ACTION: Primarily moves in flexing the arm; secondarily moves in flexing and supinating the forearm.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Flex arm on shoulder 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal anterior surface of humerus to extend arm through sagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, lateral aspect, 1" posterior to coronal suture, 1" above origin of Temporalis.

NEUROLYMPHATIC: (Post/R) 7th ICS, mid-axillary area.

VISCERAL ORGAN:

I. *Kidney:* (Ant/BL) Rectus Abdominis, 2nd section, 1" superior and 1 1/2" lateral to umbilicus.

II. *Spleen:* (Post/BL) Scapula, posterior aspect, inferior to spine near glenoid fossa, Si10.

M. A. P. : Sp8.75

V.L. : T12R

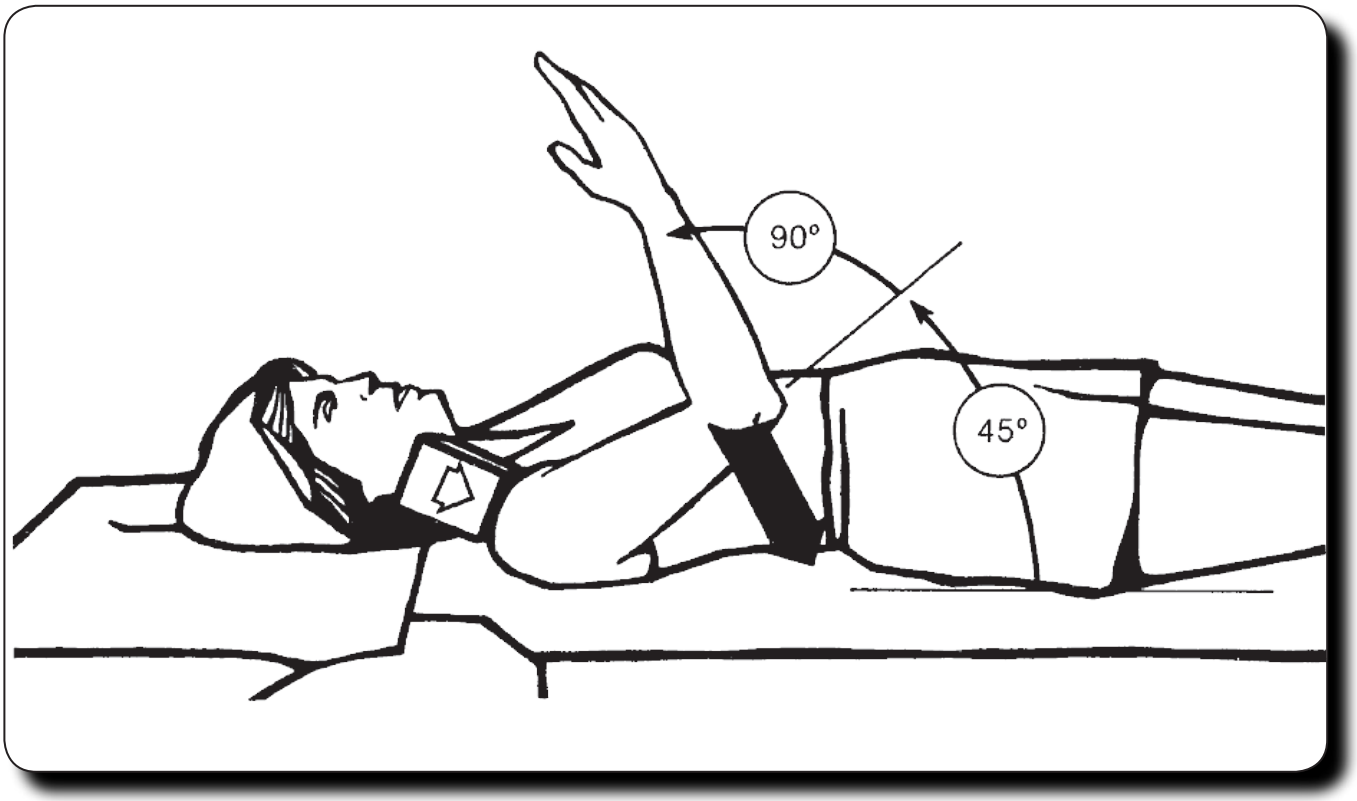
L. B. V.L. : C6R

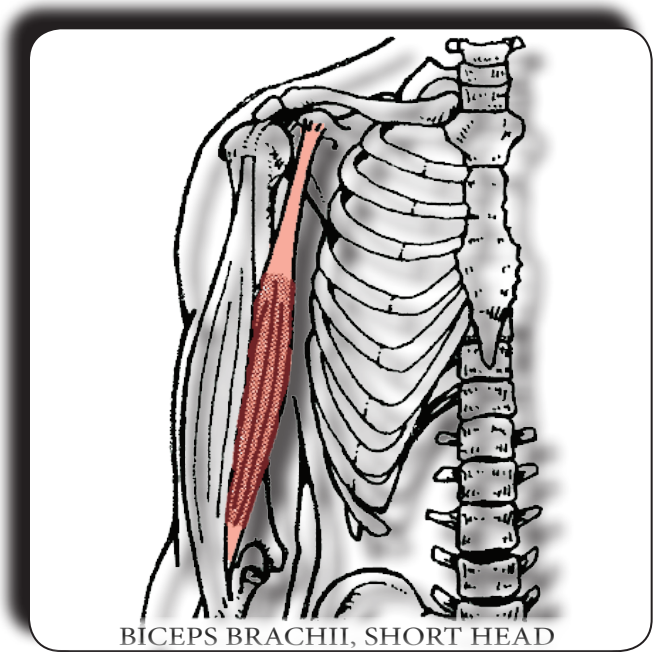
M. M. : C5

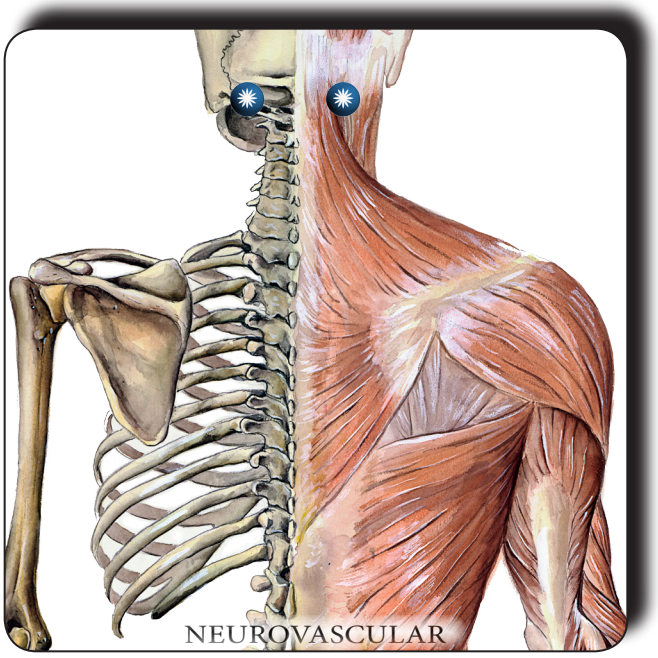
CRANIAL: Styloid

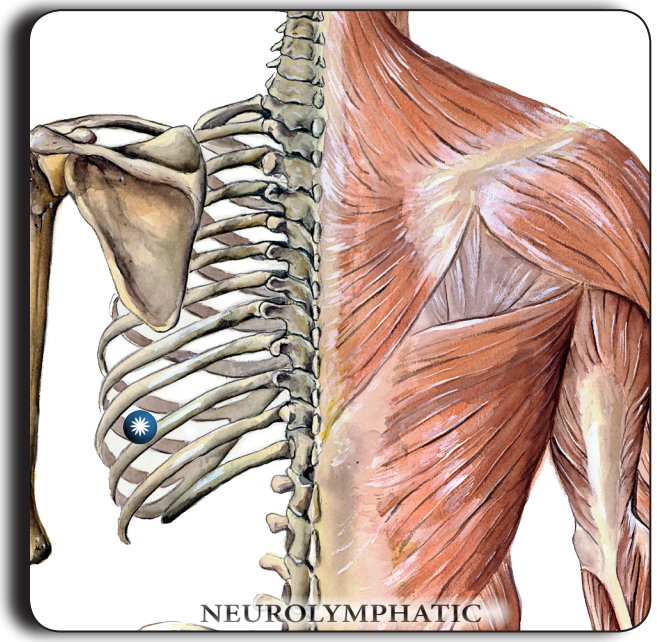
FOOT: Distal phalanx of great toe

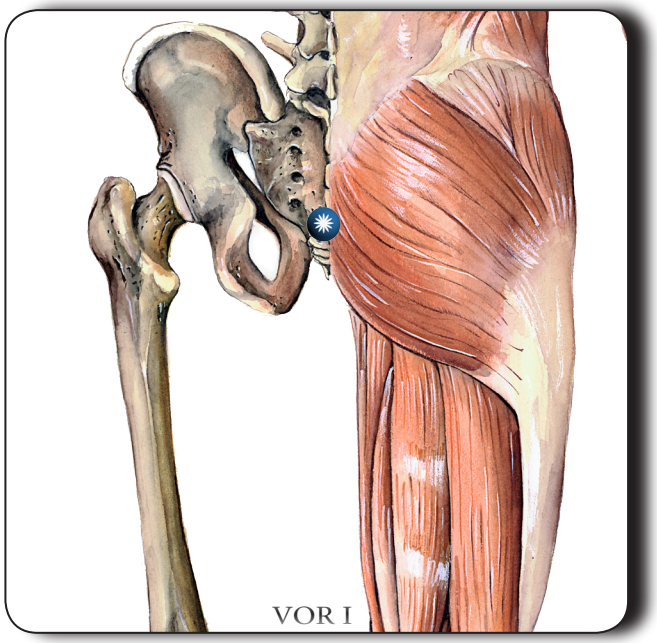
NUTRIENT SOURCE:
1. Ferrofood (S)

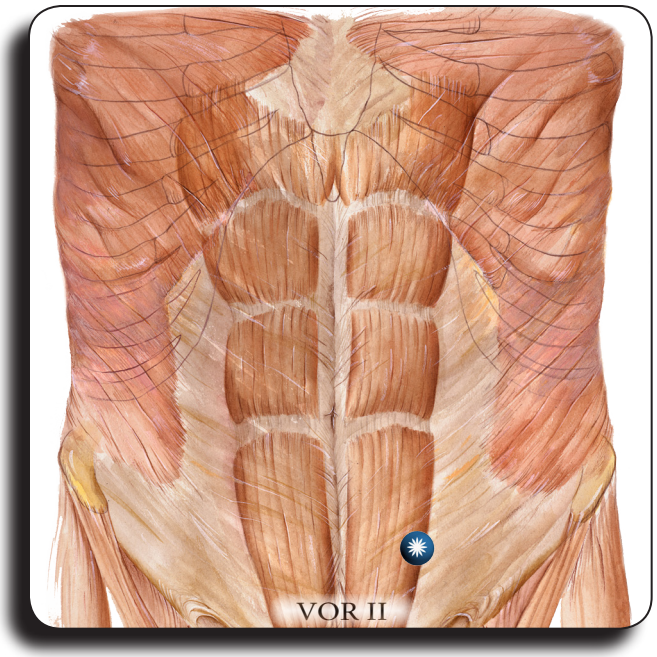


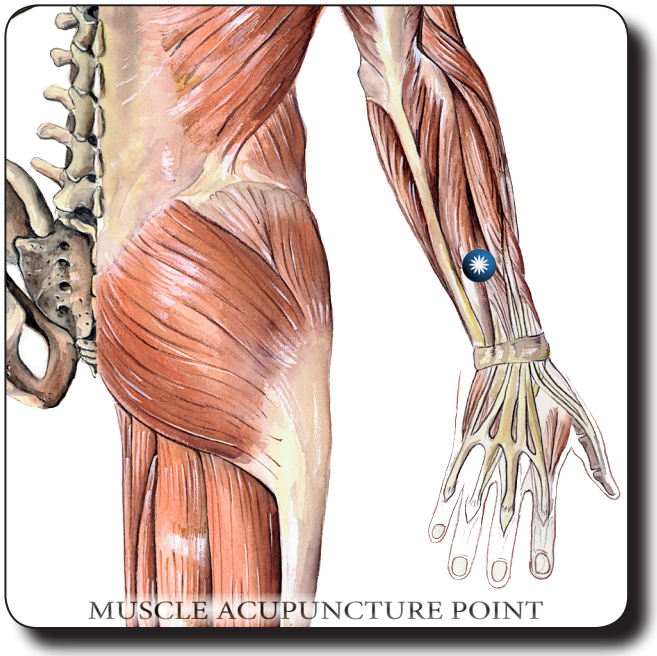

BICEPS BRACHII, SHORT HEAD


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 468: BICEPS BRACHII SHORT HEAD

ORIGIN: Tip of coracoid process of scapula.

INSERTION: Tuberosity of the radius.

ACTION: Flexes the arm, flexes the forearm and supinates the hand.

TEST:

Patient: Supine. Flex elbow 90 degrees and supinate forearm on arm.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal medial aspect of forearm to extend through sagittal plane.

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NEUROVASCULAR: (Post/BL)Occipital bone, posterior aspect, G20 just superior to transverse process of atlas.

NEUROLYMPHATIC: (Post/L) 9th ICS, mid-axillary area.

VISCERAL ORGAN:

I. *Gonads:* (Post/Midline) Pelvis, posterior aspect, Gv2, junction of sacrum and coccyx.

II. *Descending Colon - between sigmoid colon and sphincter:* (Ant/L) Rectus Abdominis, first section, 2" superior to pubes at lateral border.

M. A. P. : Tw8

V.L. : L5R

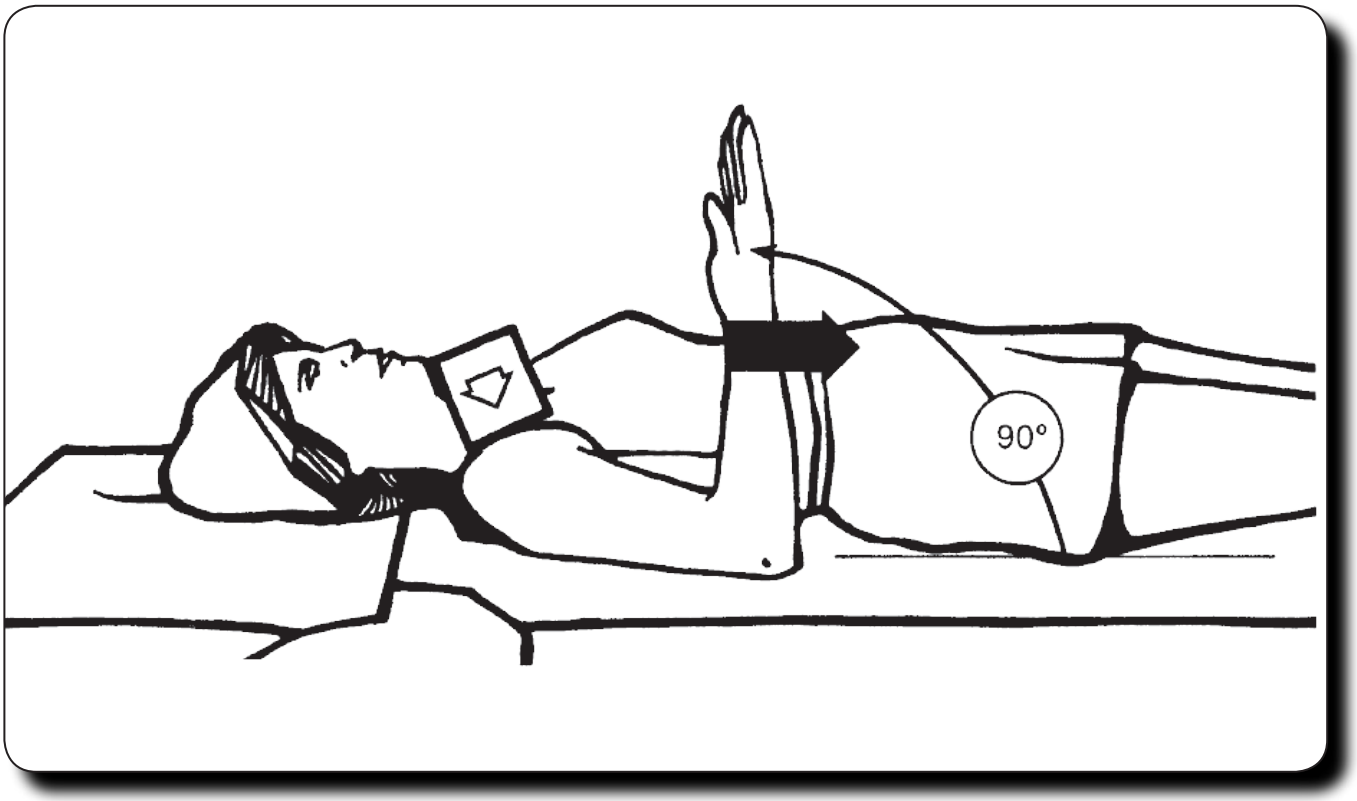
L. B. V.L. : C1R

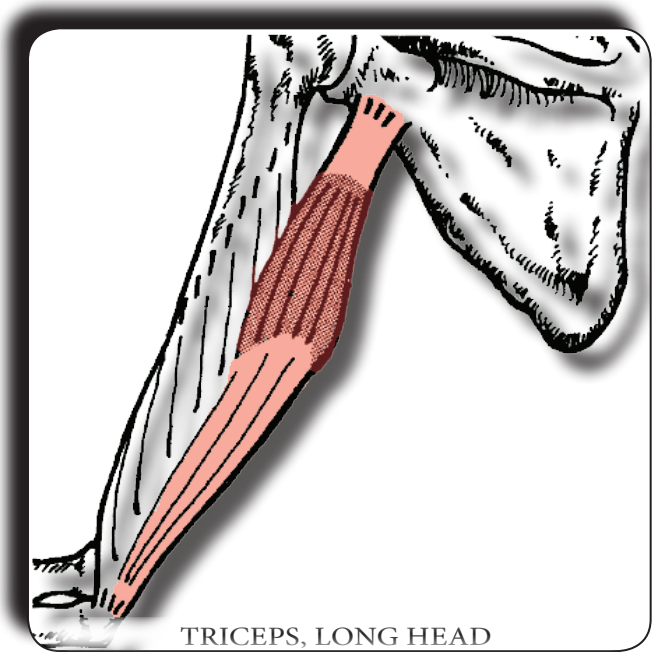
M. M. : C6

CRANIAL: Maxillary

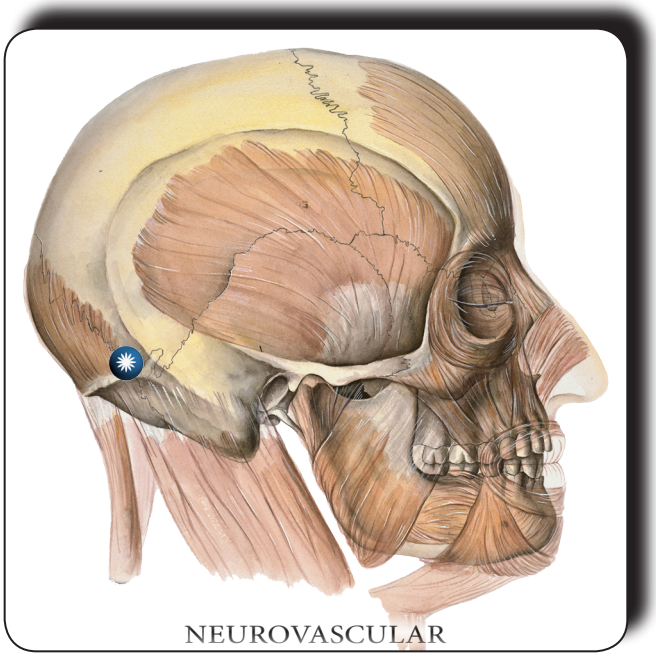
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. Min-Tran (S)

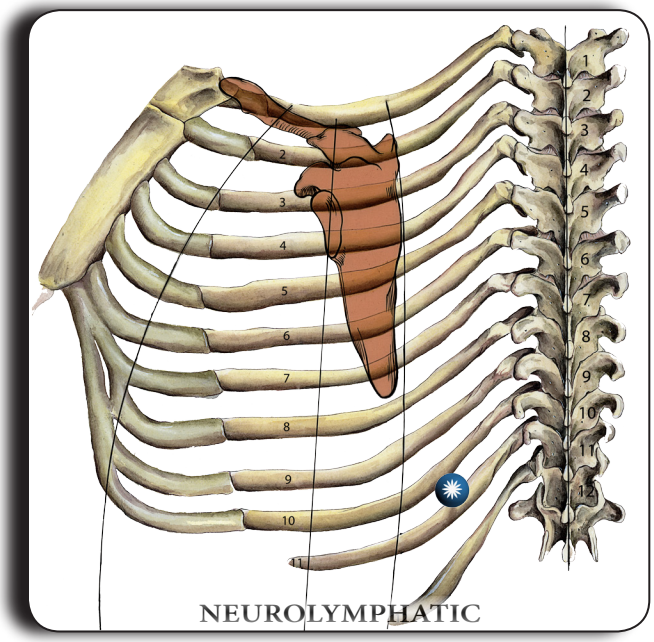




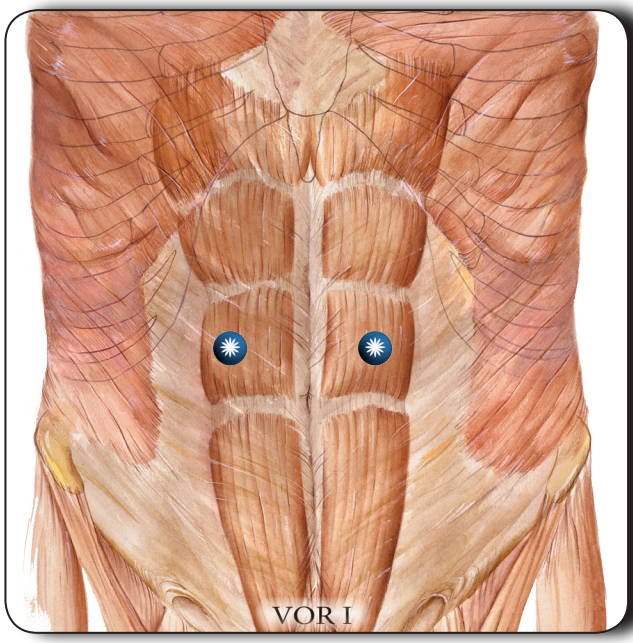
TRICEPS, LONG HEAD



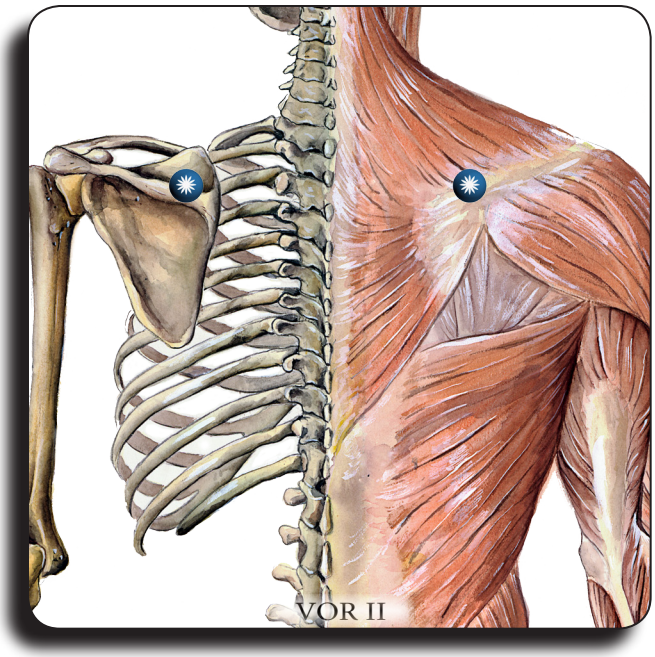
NEUROVASCULAR



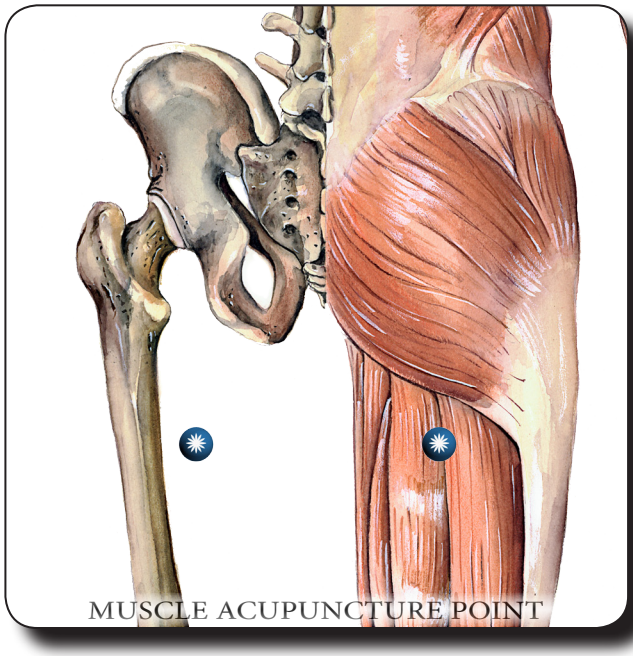
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 470: TRICEPS, LONG HEAD

ORIGIN: Infraglenoid tubercle of scapula.

INSERTION: Tendon of insertion which is attached to the upper posterior surface of the olecranon and deep fascia of the forearm.

ACTION: Extend arm on shoulder.

TEST:

Patient: Supine. With elbow flexed 90 degrees and arm at side, extend arm on shoulder.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal dorsum surface of humerus to flex arm through sagittal plane.

NEUROVASCULAR: (Lat) Cranium, posterior lateral aspect, lambdoidal suture, near junction of asterion.

NEUROLYMPHATIC: (Post/L) 10th ICS, 4" out from Spine.

VISCERAL ORGAN:

I. *Duodenum:* (Ant/BL) Rectus Abdominis, 2nd section, 2" superior and 2" lateral to umbilicus.

II. *Eustachian Tube:* (Post/BL) Scapula, 1" lateral to vertebral border.

M. A. P. : B50.3

V.L. : L4L

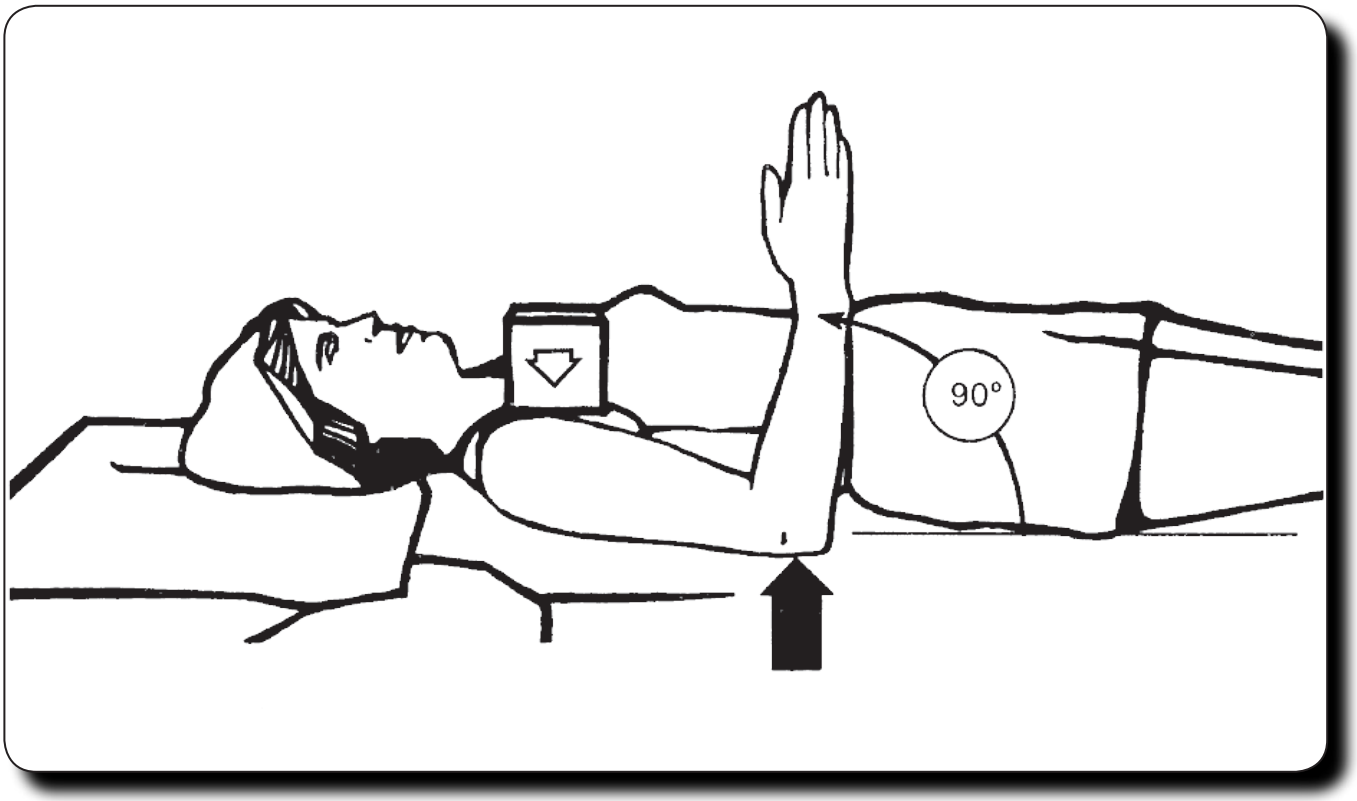
L. B. V.L. : C2L

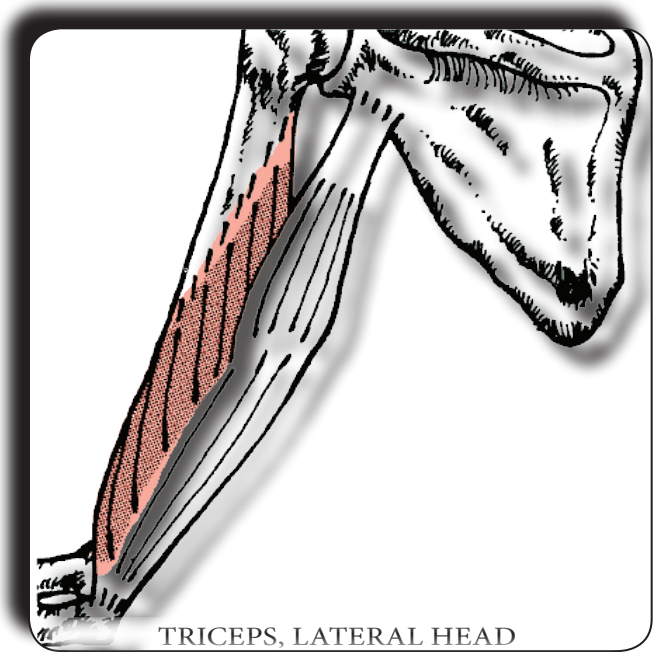
M. M. : T1

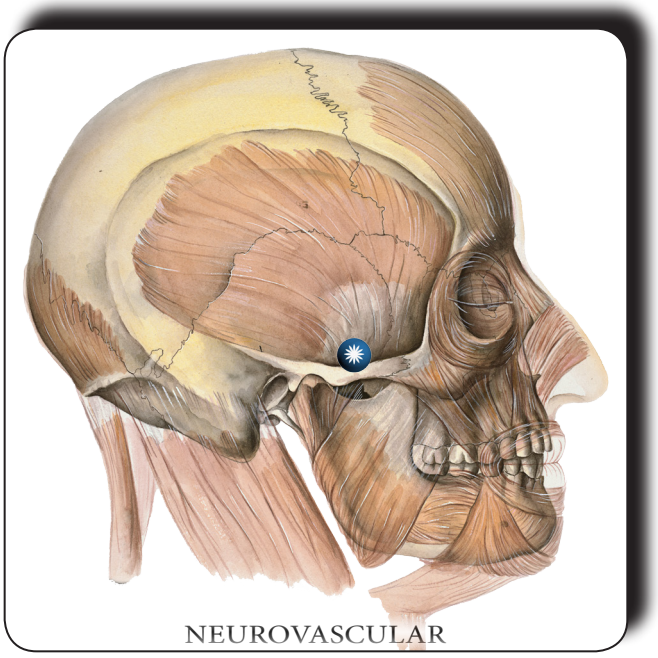
CRANIAL: Lacrimal

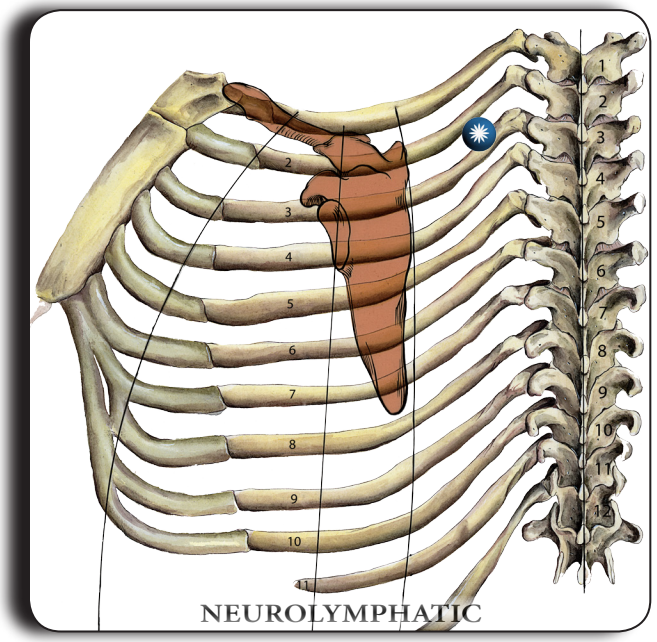
FOOT: Proximal phalanx of 2nd metatarsal.

NUTRIENT SOURCE:
l. Min-Tran (S)




TRICEPS, LATERAL HEAD


NEUROVASCULAR



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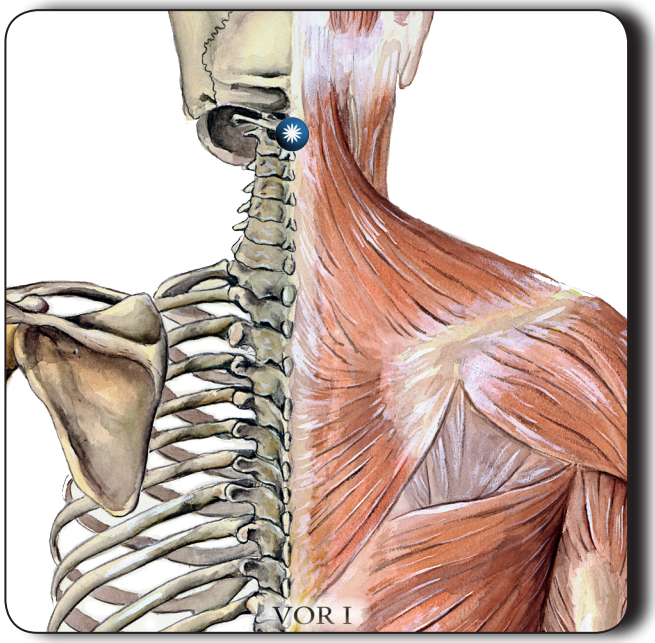
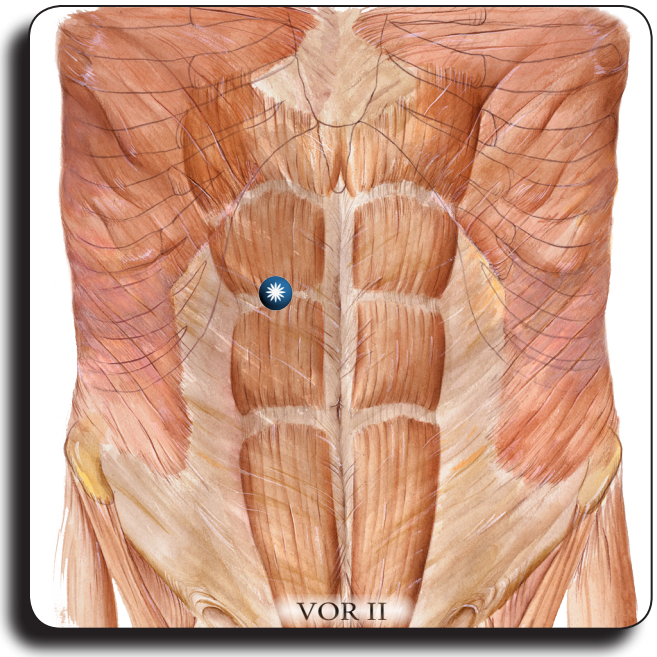
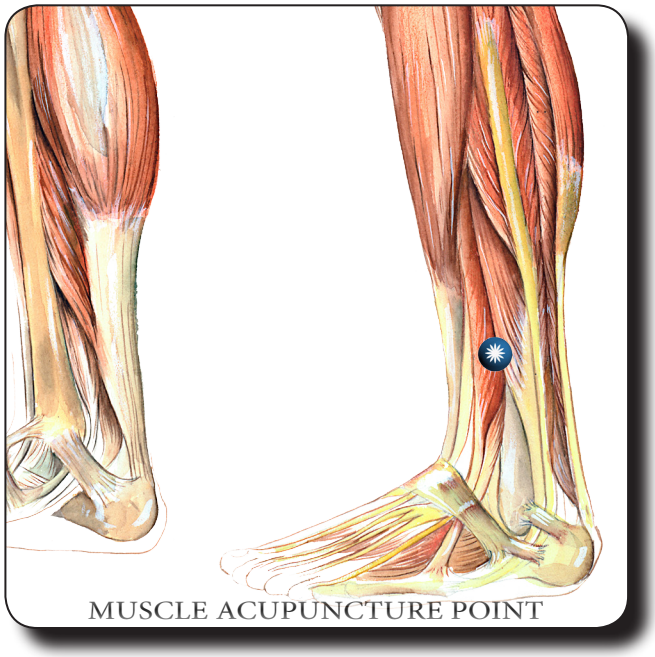

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 472: TRICEPS, LATERAL HEAD

ORIGIN: Posterior lateral surface of humerus.

INSERTION: Tendon of insertion which is attached to the upper posterior surface of the olecranon and deep fascia of the forearm.

ACTION: Extends forearm on arm.

TEST:

Patient: Supine. Flex elbow 90 degrees and supinate forearm on arm.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal dorsum surface of forearm to flex through sagittal plane.

NEUROVASCULAR: (Lat) Temporal bone, zygomatic process, superior aspect, located before zygomatic-temporal suture.

NEUROLYMPHATIC: (Post/L) 2nd ICS, 2" from spine.

VISCERAL ORGAN:

I. *Salivary Glands - Sublingual:* (Post/Midline) Neck, posterior aspect, between spinous of atlas and axis.

II. *Gallbladder:* (Ant/R) Rectus Abdominis, 2nd section at insertion.

M. A. P. : G39

V.L. : T10L

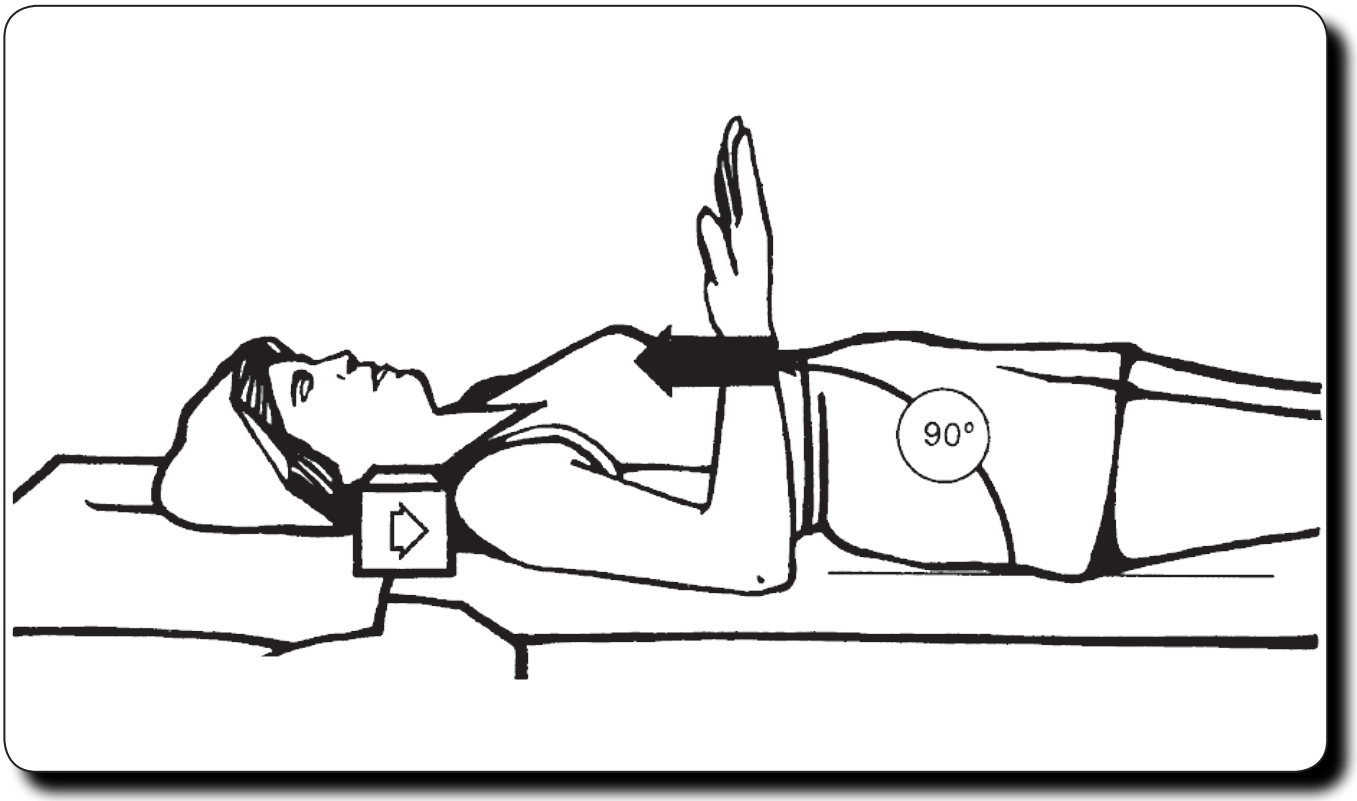
L. B. V.L. : T1L

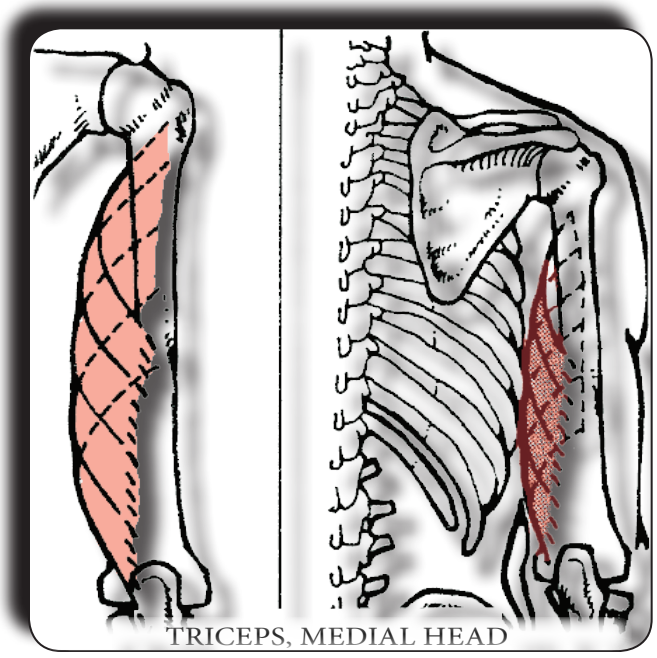
M. M. : T1

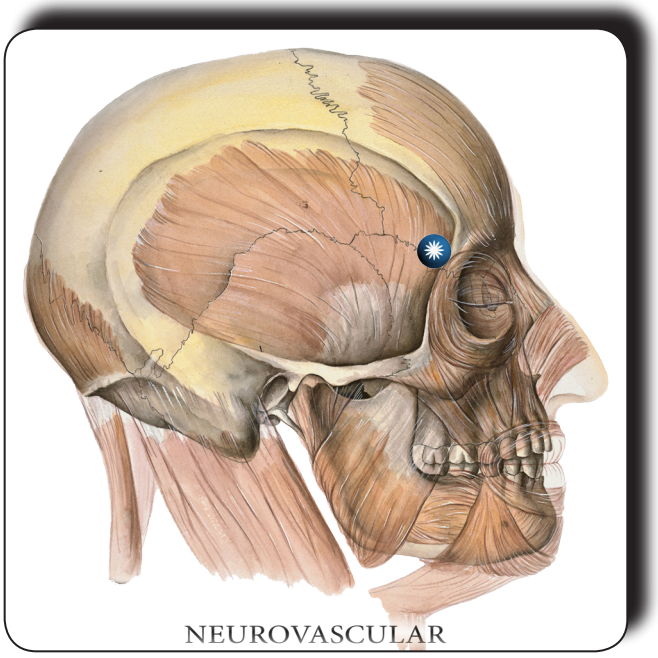
CRANIAL: Zygoma

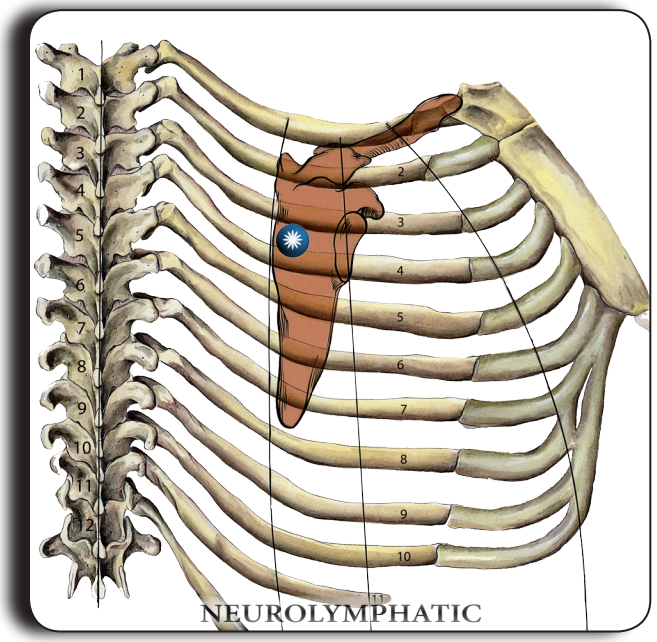
FOOT: 3rd Cuneiform

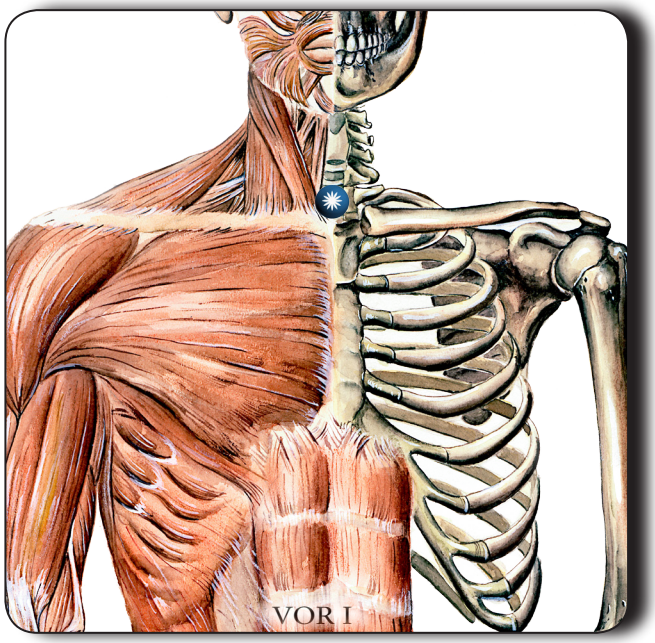
NUTRIENT SOURCE:
1. Kali Sulph 6X (HP)

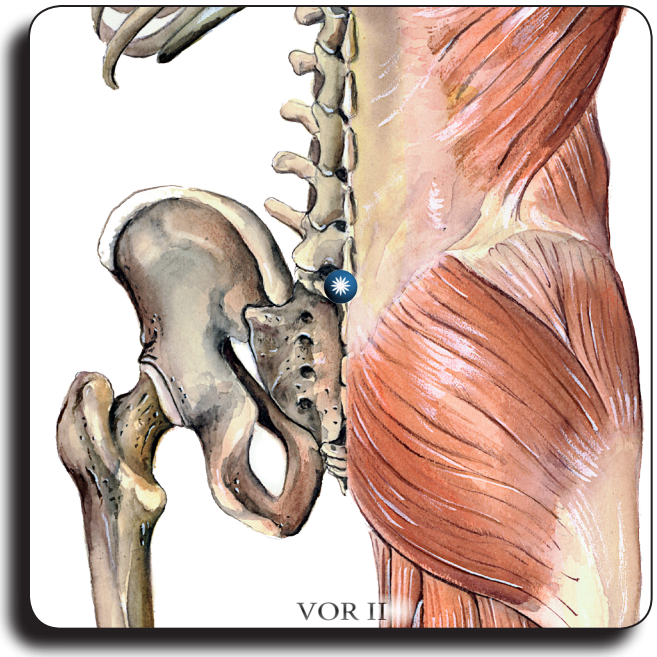


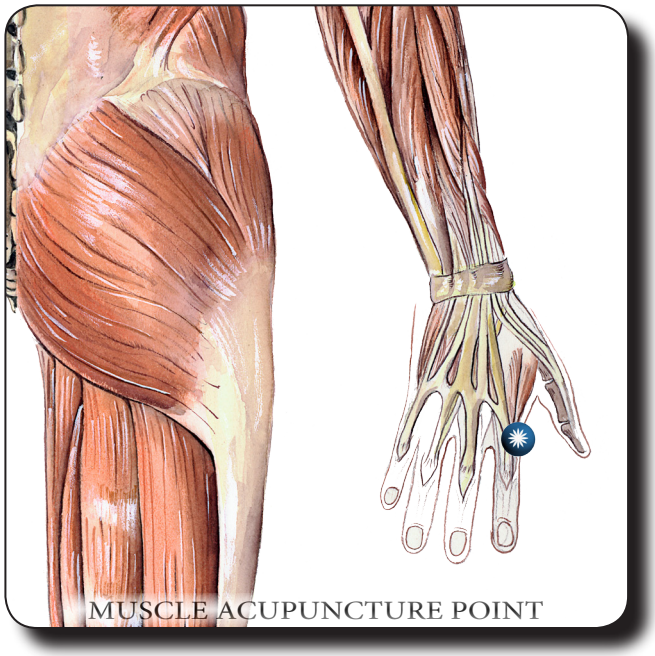

TRICEPS, MEDIAL HEAD


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 474: TRICEPS, MEDIAL HEAD

ORIGIN: Posterior medial surface of the body of the humerus.

INSERTION: Olecranon, other fibers to the tendon of insertion.

ACTION: Extends forearm on arm.

TEST:

Patient: Supine. Flex elbow 90 degrees and pronate forearm on arm.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal palmar surface of forearm to flex through sagittal plane.

NEUROVASCULAR: (Lat) Frontal bone, lateral aspect, superior temporal line at level of superciliary ridge.

NEUROLYMPHATIC: (Post/R) 3rd ICS, under scapula.

VISCERAL ORGAN:

I. *Thyroid:* (Ant/Midline) Neck, anterior aspect, Cv22.25 located just superior to sternal notch.

II. *Prostate/Uterus:* (Post/Midline) Spinal Column, lumbosacral junction, Gv2.7.

M. A. P. : Li2

V.L. : T3R

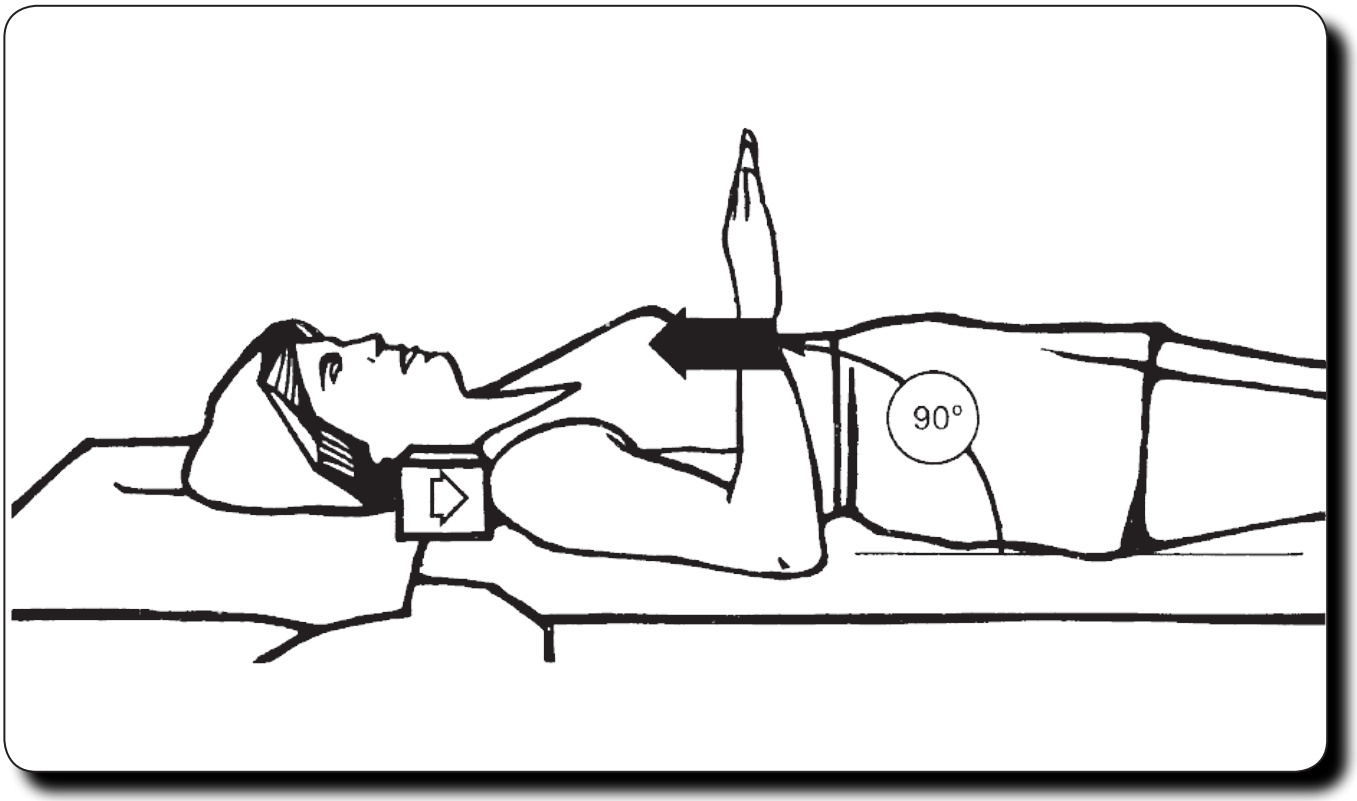
L. B. V.L. : T8R

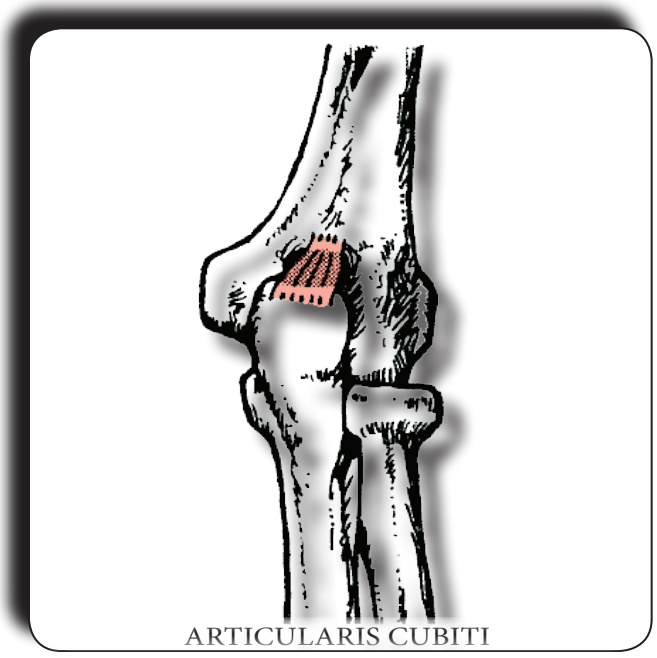
M. M. : T1

CRANIAL: Styloid

FOOT: 2nd phalanx - big toe

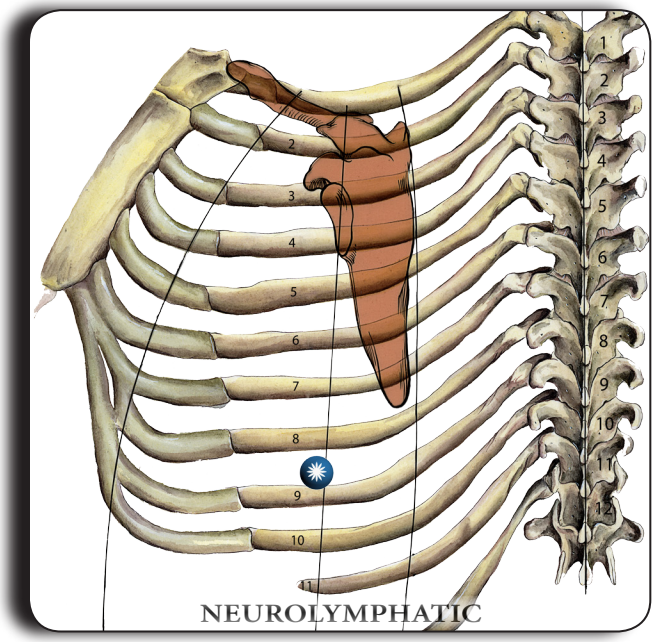
NUTRIENT SOURCE:
1. Organic Minerals (S)



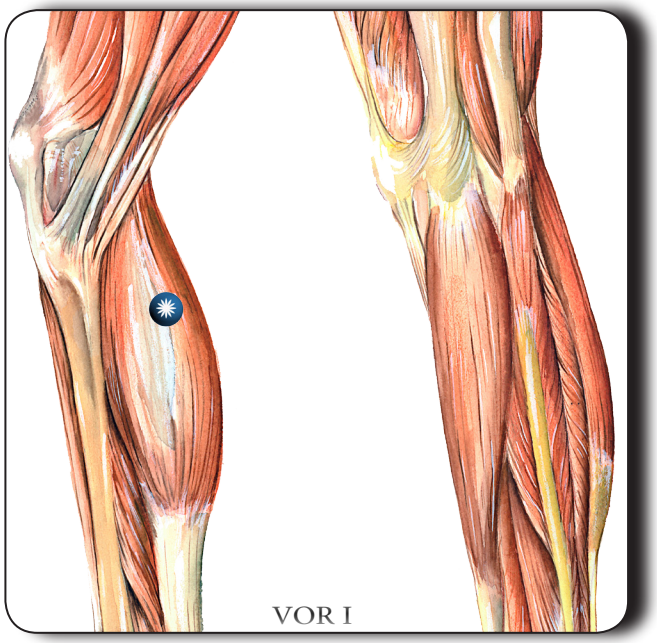


ARTICULARIS CUBITI

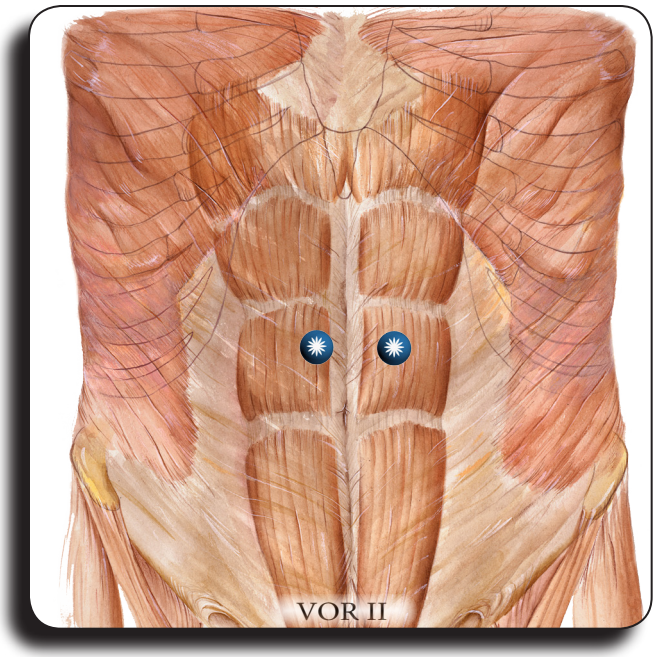
NEUROVASCULAR



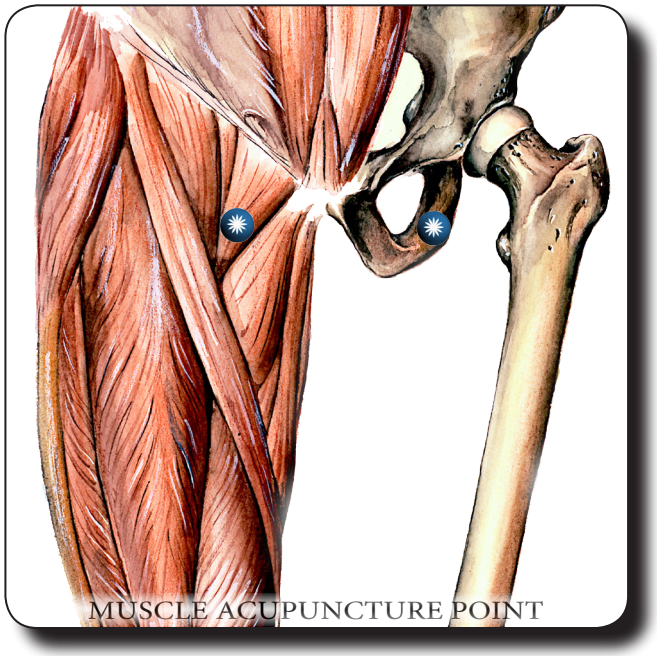
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 476: ARTICULARIS CUBITI

ORIGIN: Deep surface of medial lower part of triceps, 2-3" above elbow.

INSERTION: Posterior ligament and synovial membrane of the elbow joint.

ACTION: Extend forearm on arm.

TEST:

Patient: Supine. Flex and supinate forearm on arm 135 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal dorsum surface of forearm to flex through sagittal plane.

NEUROVASCULAR: (Ant/BL) Zygomatic bone, lateral inferior aspect of eye orbit.

NEUROLYMPHATIC: (Ant/L) 8th ICS, 2" from costocartilage Junction.

VISCERAL ORGAN:

I. *Bladder:* (Lat/BL) Calf, posterior superior aspect, 3" below knee in medial Gastrocnemius.

II. *Parotid:* (Ant/BL) Rectus abdominis 2nd section, 2" superior and 1" lateral from umbilicus at K17.

M. A. P. : Lv11

V.L. : L5L

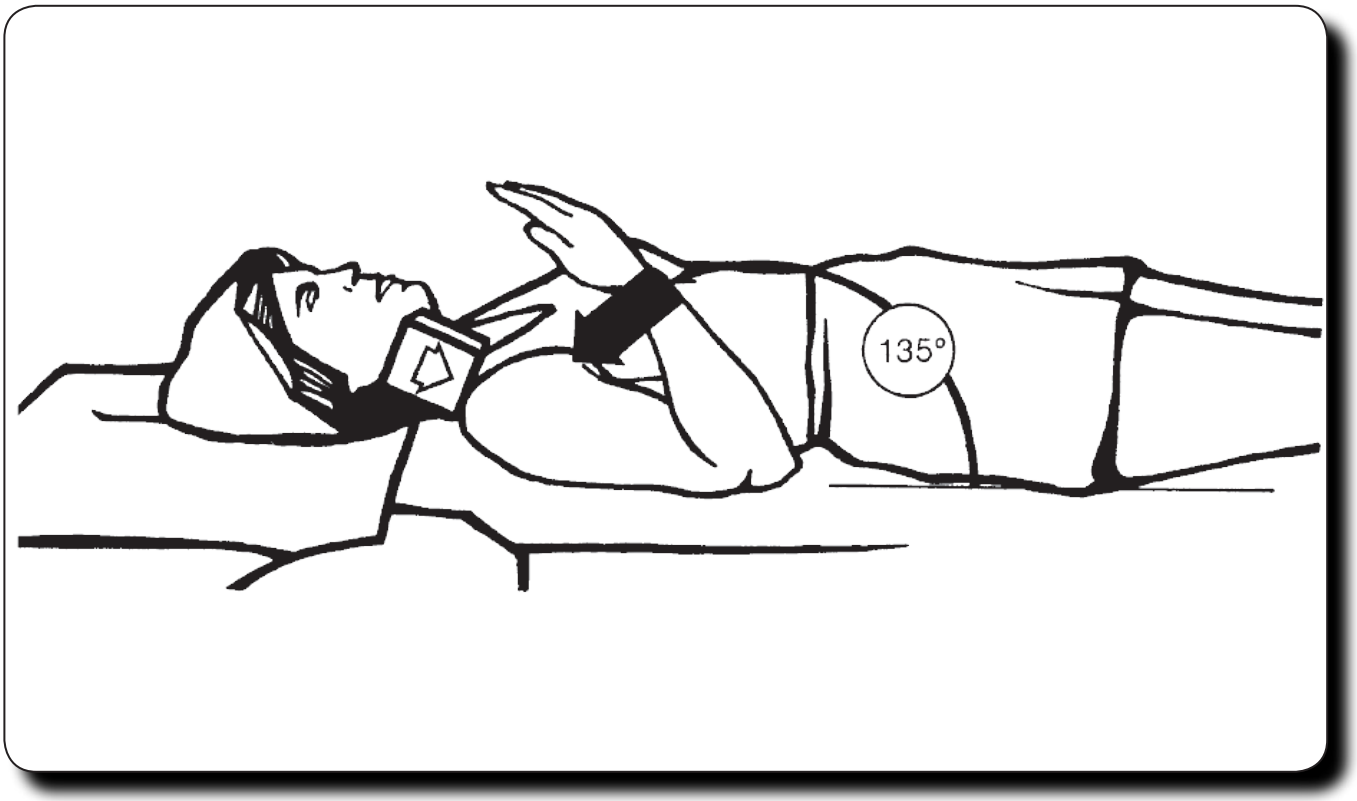
L. B. V.L. : C1L

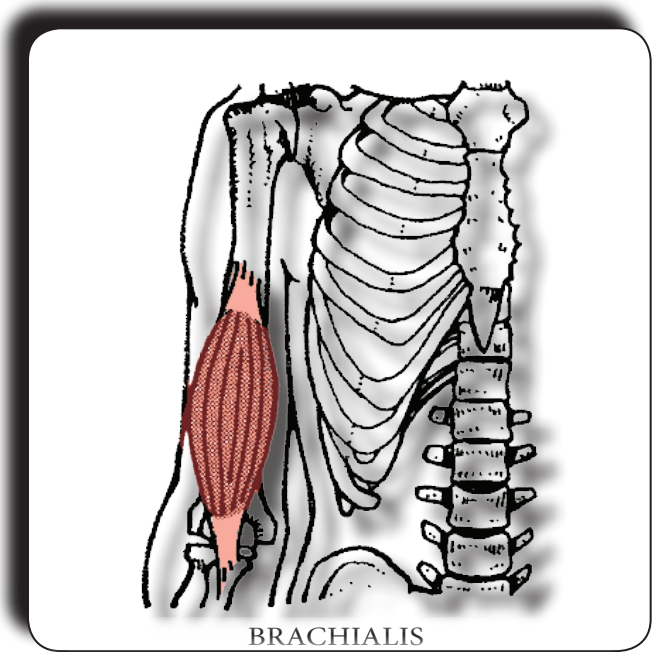
M. M. : T1

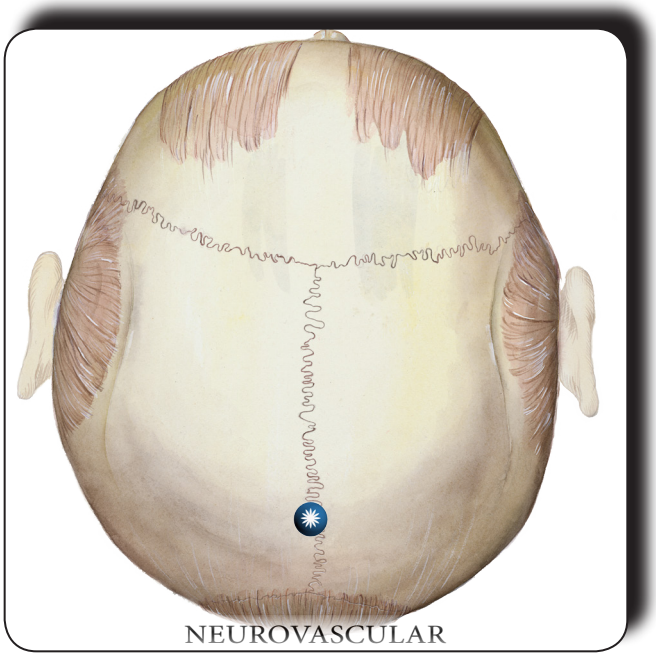
CRANIAL: Palatine

FOOT: 1st Metatarsal

NUTRIENT SOURCE:
1. Niacinamide B6 (S)




BRACHIALIS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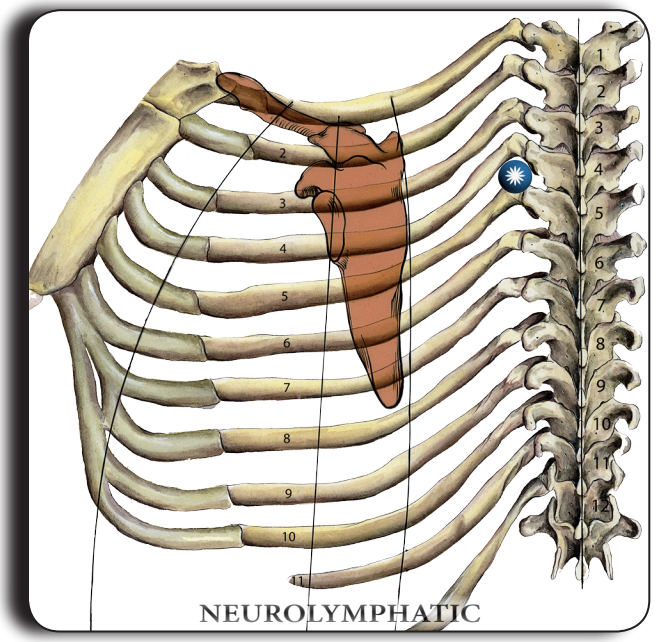
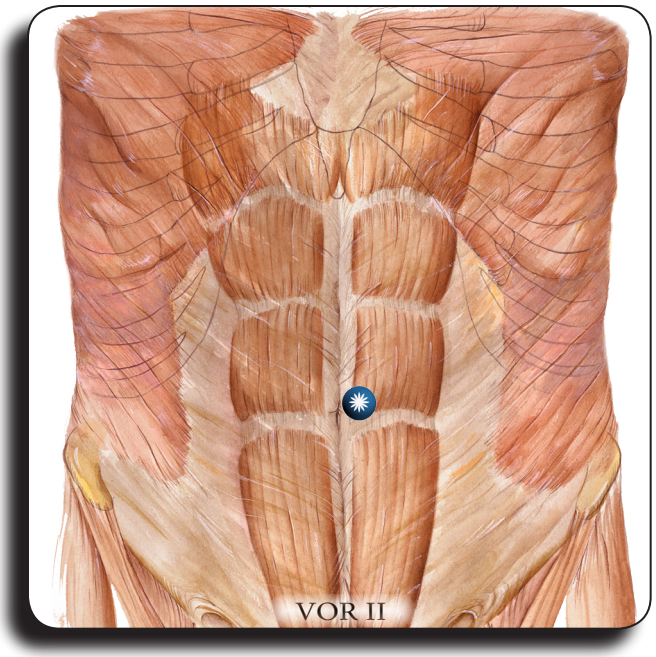
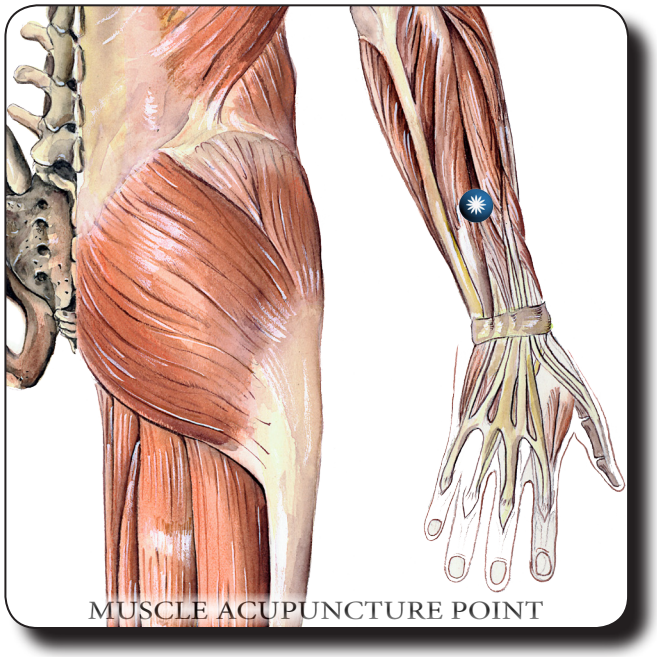


NEUROLYMPHATIC

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 478: BRACHIALIS

ORIGIN: Distal anterior surface of humerus.

INSERTION: Proximal anterior surface of olecranon.

ACTION: Flexes the forearm on the arm.

TEST:

Patient: Supine. Flex elbow 90 degrees and pronate forearm on arm until palmar surface of hand faces toward midline.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral shoulder.
Contact: Distal dorsal surface of forearm to extend forearm through sagittal plane.

NEUROVASCULAR: (Sup/Midline) Cranium, superior aspect, midline sagittal suture, 2" anterior to posterior fontanelle.

NEUROLYMPHATIC: (Post/L) 4th ICS, 1 and 1/2" from spine .

VISCERAL ORGAN:

I. *Tonsils:* (Ant/BL) Maxillary bone, inferior aspect, St3 just above teeth.

II. *Jejunum:* (Ant/L) Abdomen, 2 o'clock on umbilicus.

M. A. P. : Tw8.5

V.L. : L5L

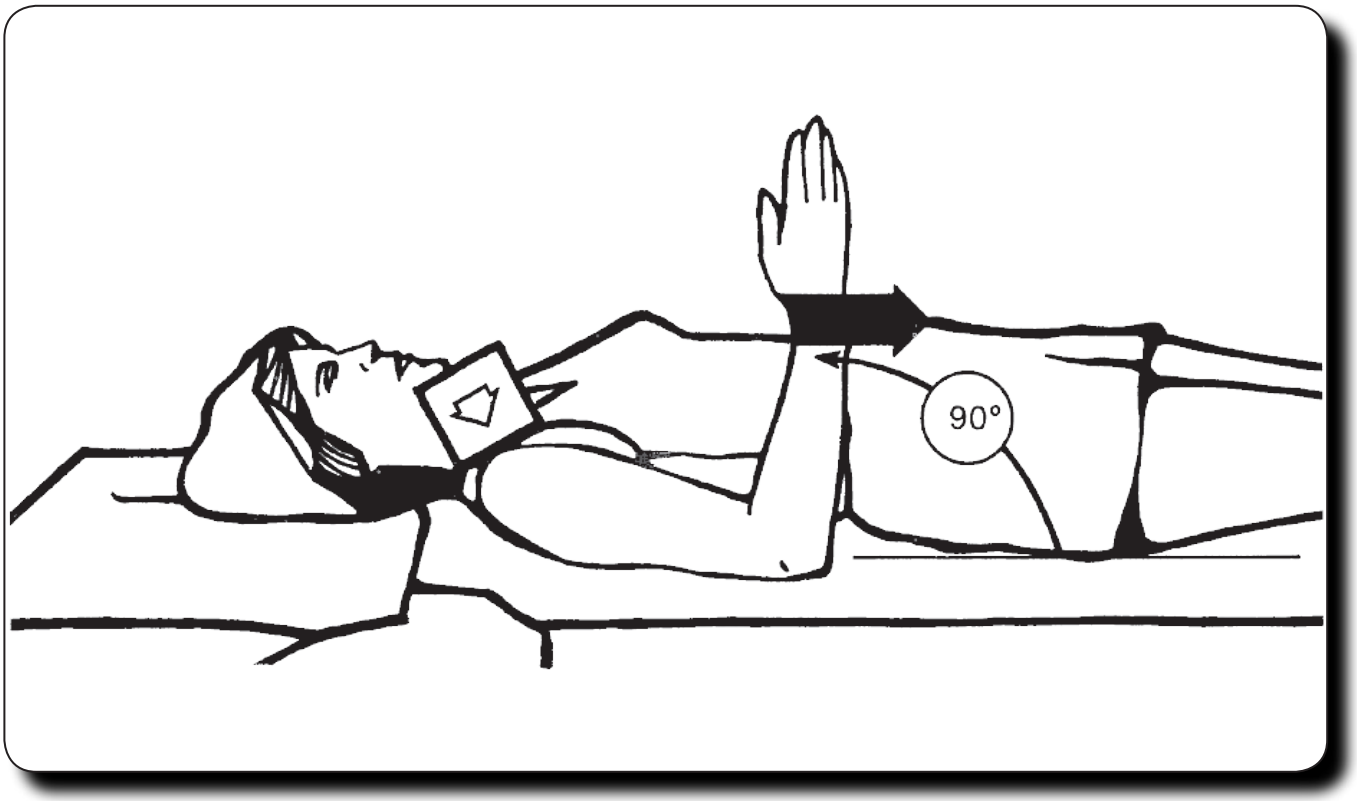
L. B. V.L. : C1L

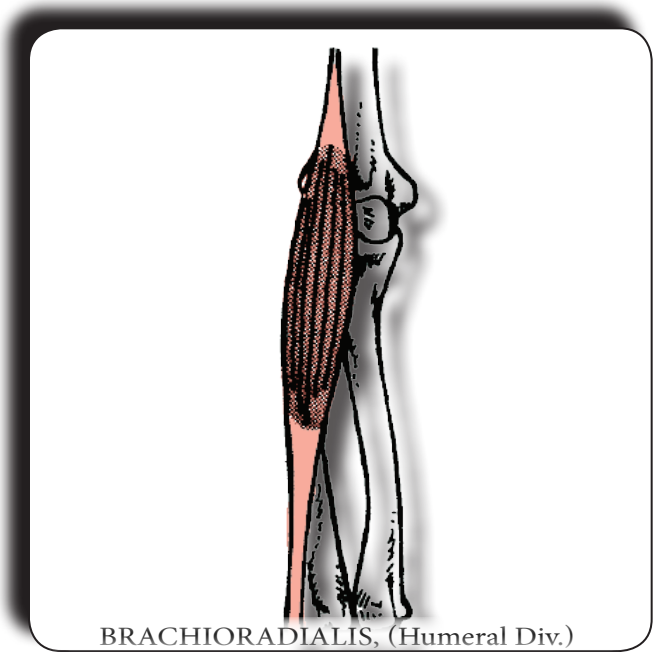
M. M. : C6

CRANIAL: Temporal

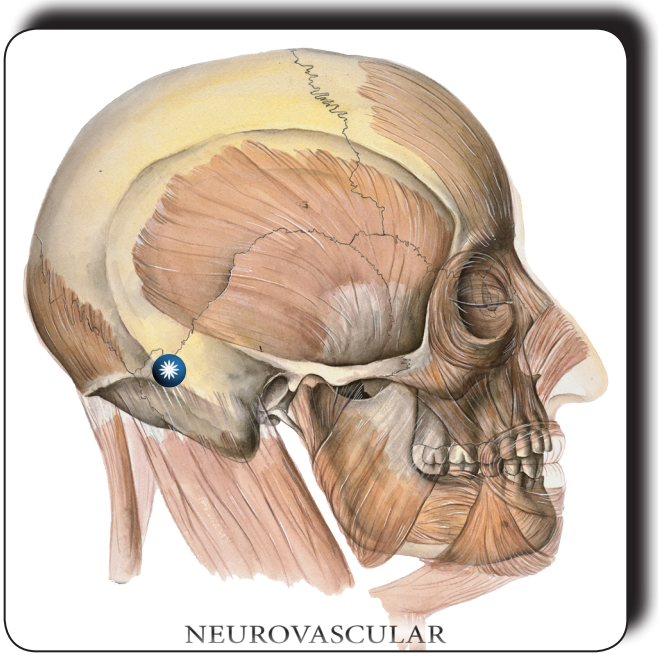
FOOT: Cuboid

NUTRIENT SOURCE:
1. Organic Iodine (S)

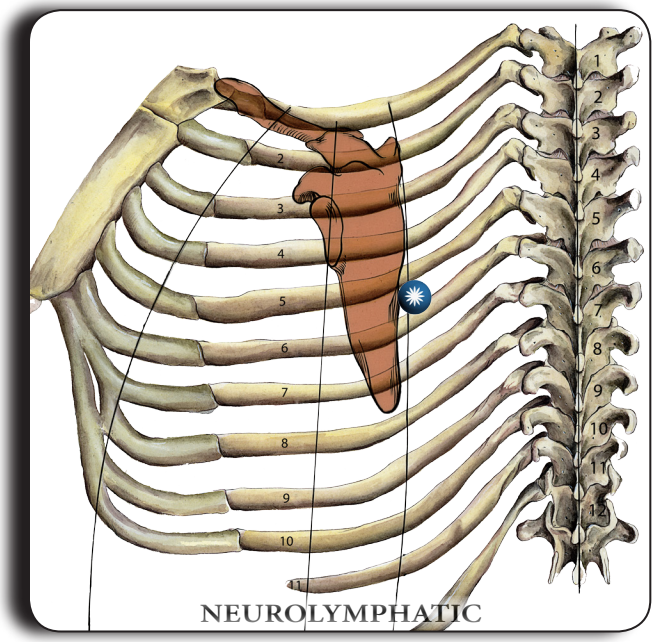




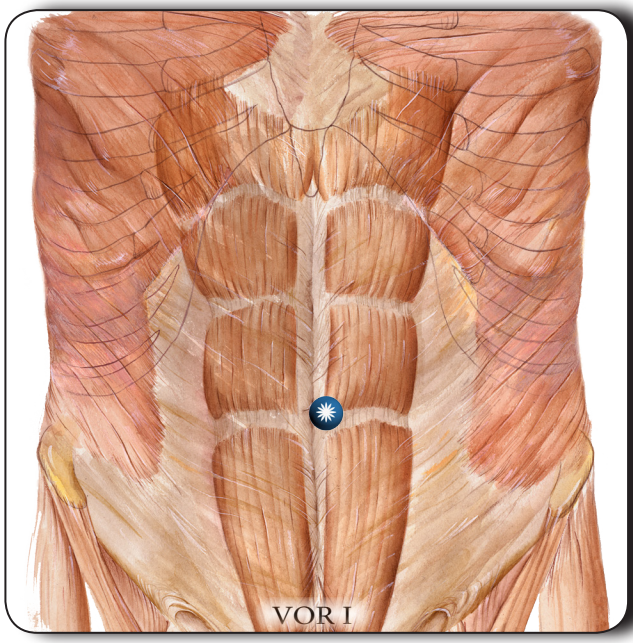
BRACHIORADIALIS, (Humeral Div.)



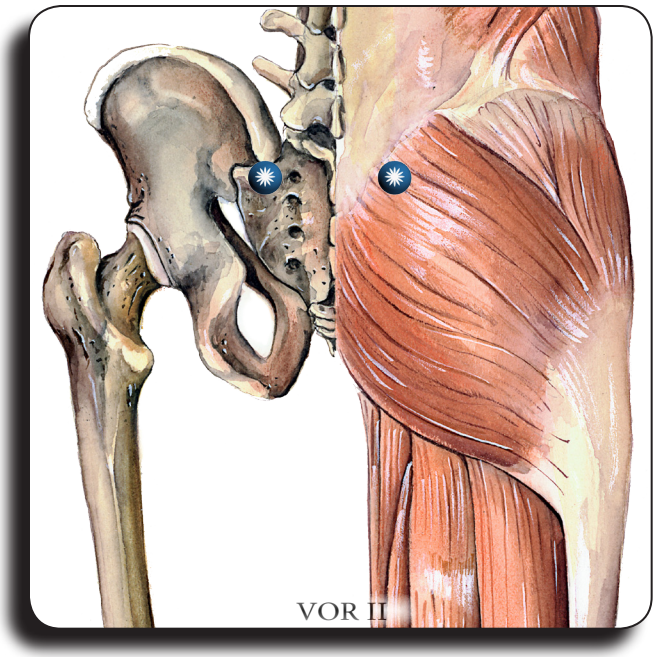
NEUROVASCULAR



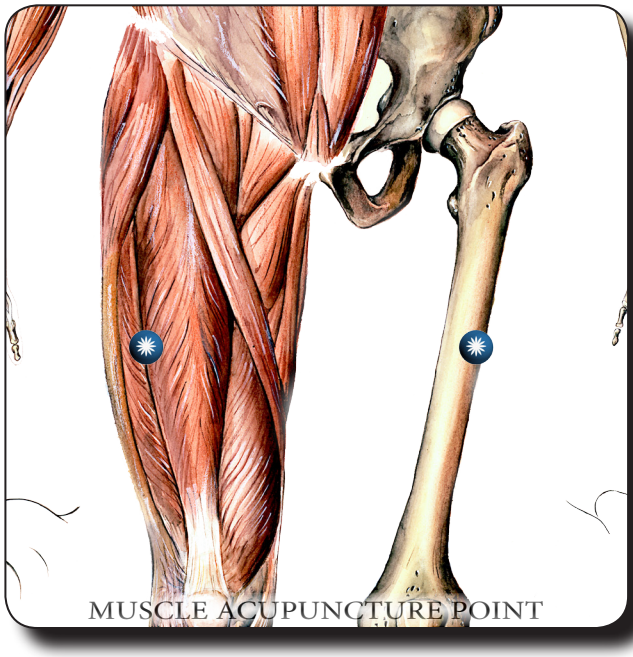
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 480: BRACHIORADIALIS, (Humeral Division)

ORIGIN: Distal lateral surface of humerus.

INSERTION: Lateral side, base of styloid process of radius.

ACTION: Flexes forearm on arm.

TEST:

Patient: Supine. Pronate forearm completely. Flex forearm on arm 90 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral anterior shoulder.
Contact: Distal dorsal aspect of forearm to extend forearm on arm through sagittal plane.

NEUROVASCULAR: (Lat) Cranium, lateral posterior aspect, squamosal suture, near asterion.

NEUROLYMPHATIC: (Post/L) 5th ICS, at vertebral border of scapula.

VISCERAL ORGAN:

I. *Ileum - Peyer's Patches:* (Ant/L) Abdomen, 3 o'clock on umbilicus.

II. *Gonads:* (Post/BL) Pelvis, posterior aspect, B27 below PSIS.

M. A. P. : St32

V.L. : L5L

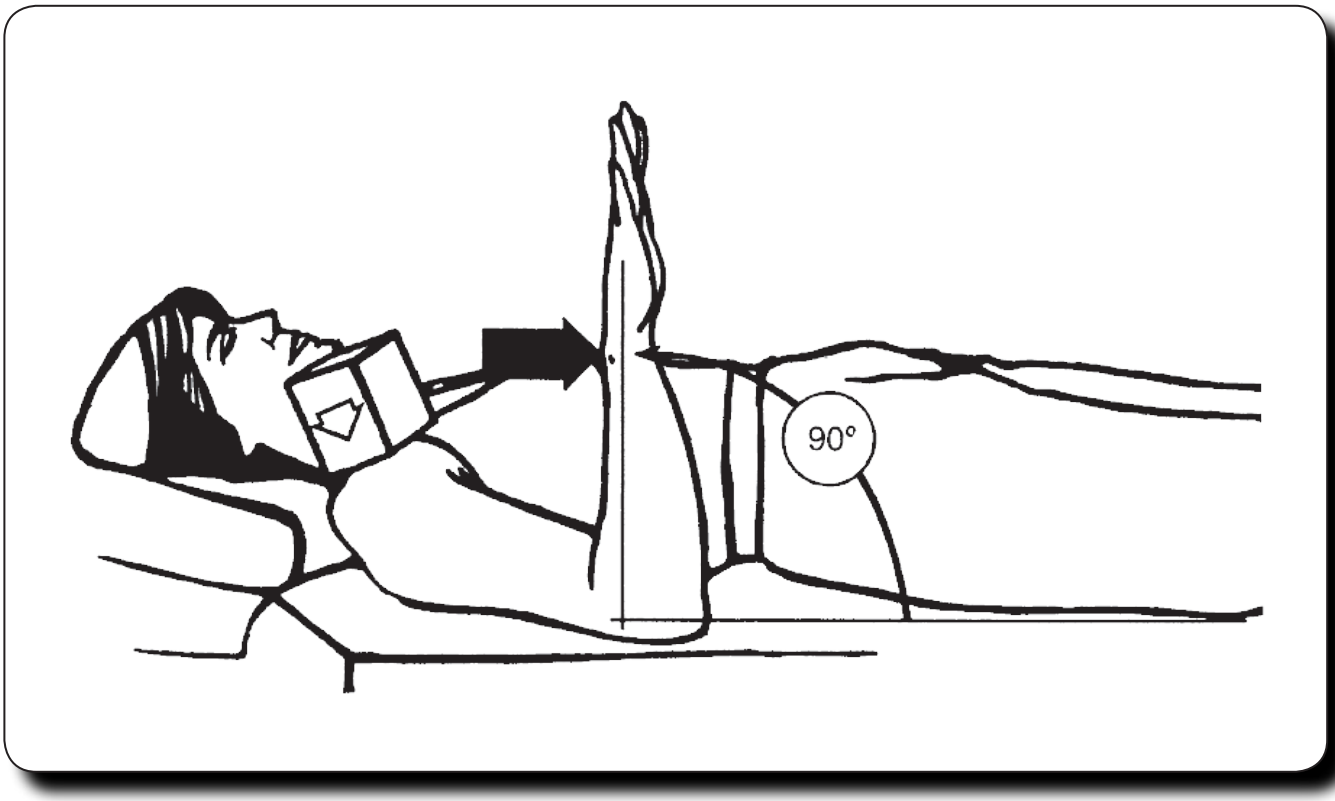
L. B. V.L. : C1L

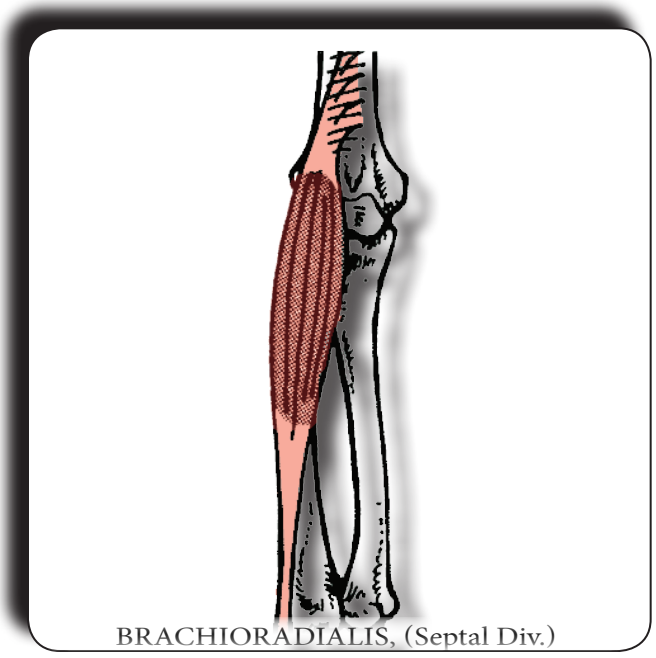
M. M. : C7

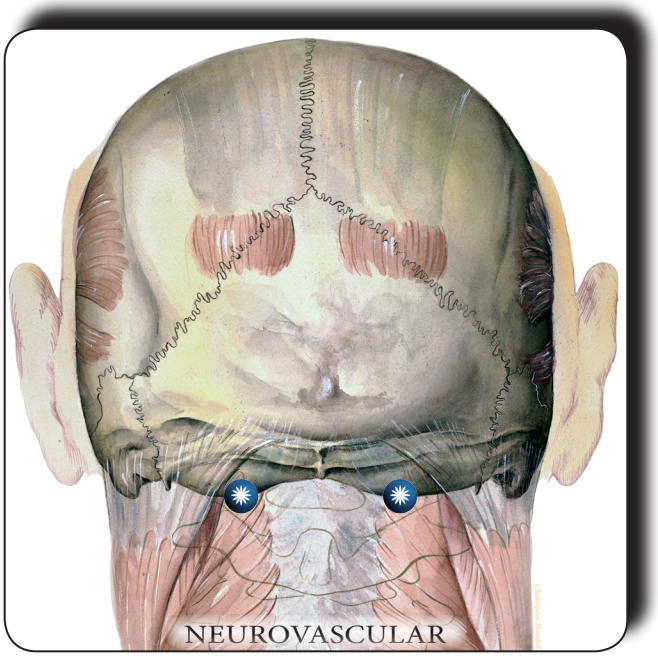
CRANIAL: Temporal

FOOT: Cuboid

NUTRIENT SOURCE:
1. Silicea-Homeopathic (HP)




BRACHIORADIALIS, (Septal Div.)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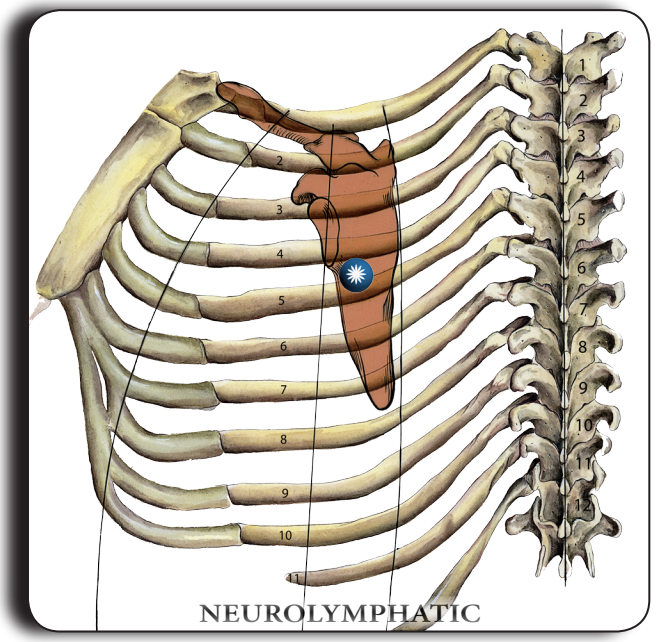
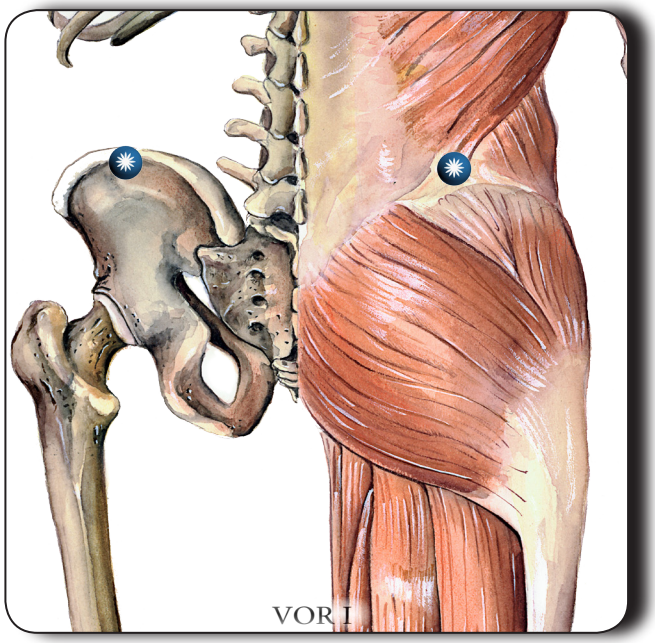
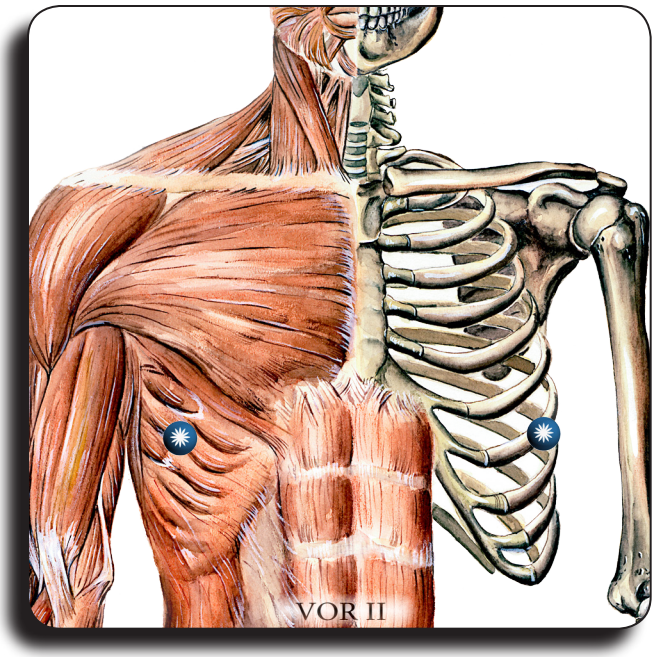
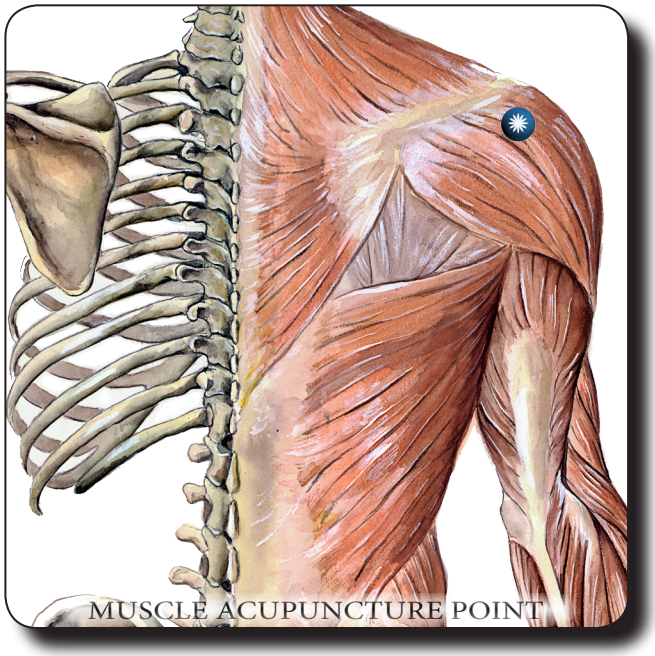

NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 482: BRACHIORADIALIS, (Septal Division)

ORIGIN: Lateral intermuscular septum located on the lower lip of the intertubercular sulcus.

INSERTION: Forms a flat tendon that attaches to the lateral side of the lower end of radius.

ACTION: Flexes forearm on arm.

TEST:

Patient: Supine. Pronate forearm completely. Flex forearm on arm 120 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral anterior shoulder.
Contact: Distal dorsal aspect of forearm to extend forearm on arm through sagittal plane.

NEUROVASCULAR: (Post/BL) Occipital bone, posterior inferior aspect 1 1/2" lateral to midline bilaterally.

NEUROLYMPHATIC: (Lat/L) 4th ICS, mid-axillary area.

VISCERAL ORGAN:

I. *Kidney:* (Post/BL) Pelvis, posterior aspect, at crest of ilium.

II. *Lungs:* (Ant/BL) Ribcage, lateral aspect, inferior border of 7th rib, anterior to mid-axillary line.

M. A. P. : Tw13.8

V.L. : T8L

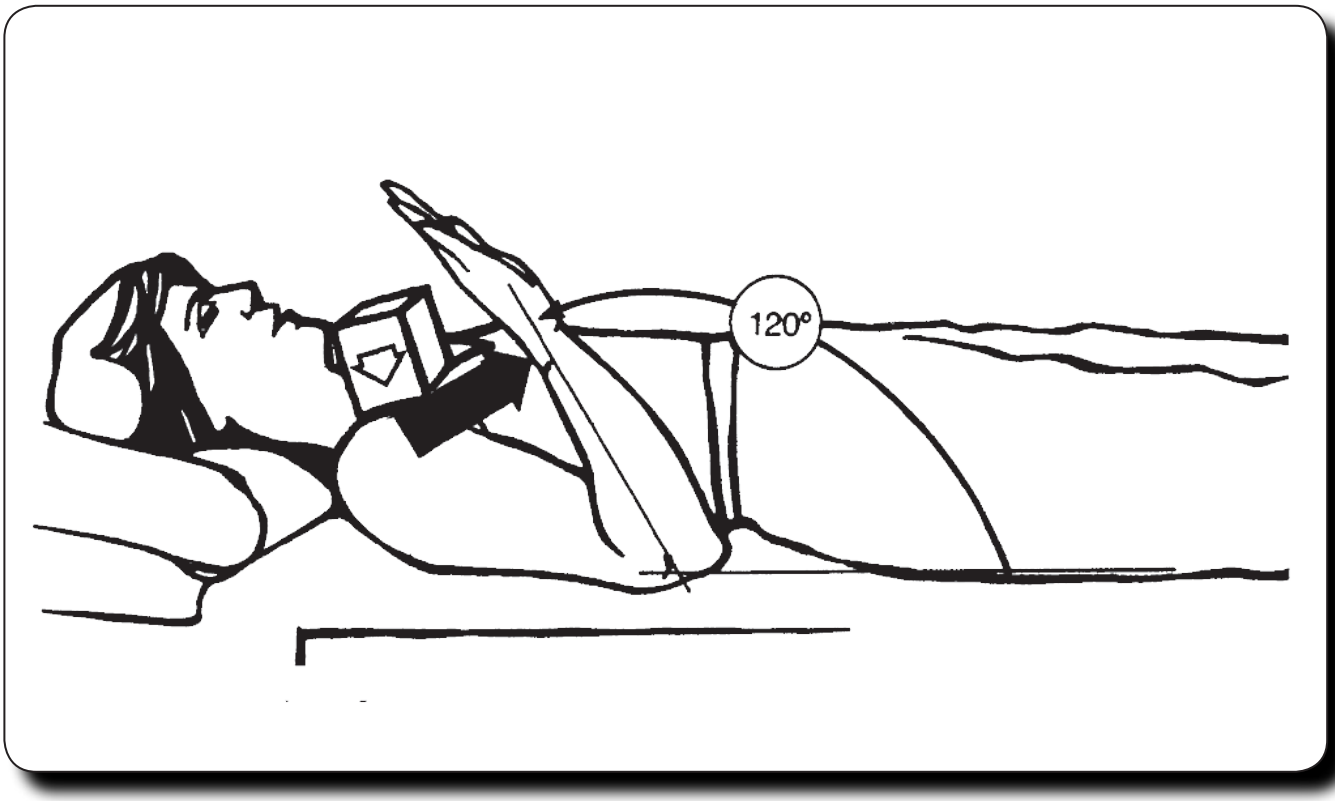
L. B. V.L. : T3L

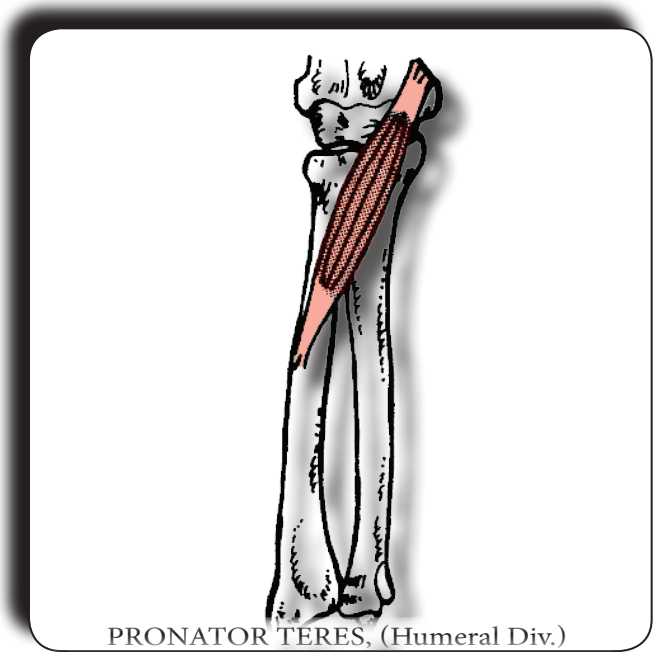
M. M. : C6

CRANIAL: Temporal

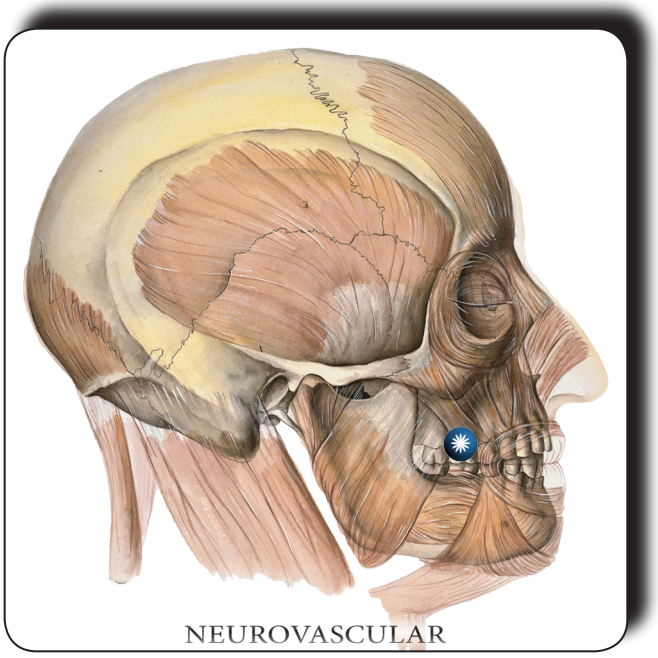
FOOT: Cuboid

NUTRIENT SOURCE:
1. ACP (S)

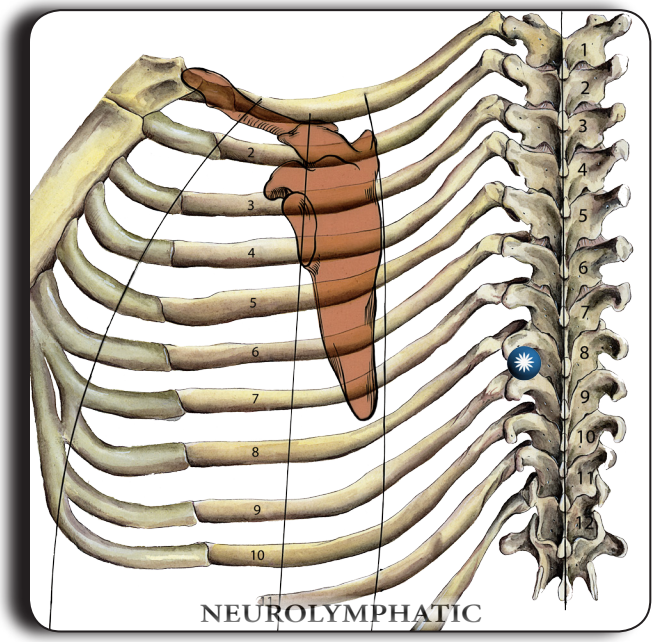




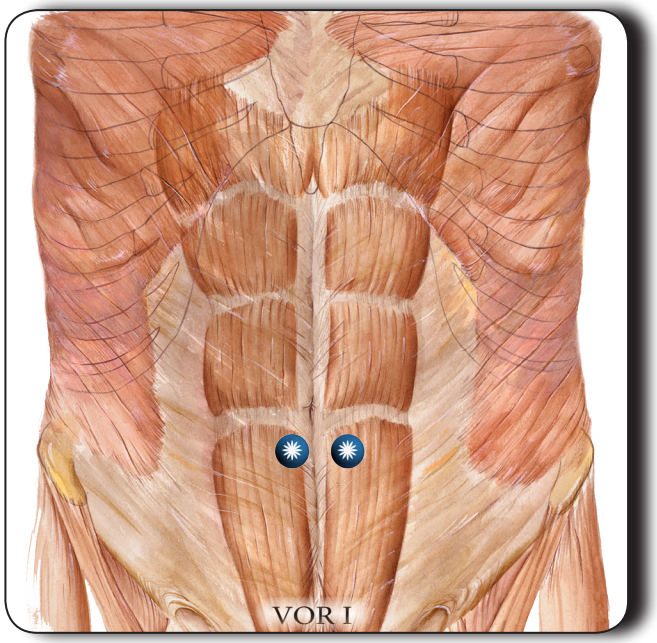
PRONATOR TERES, (Humeral Div.)



NEUROVASCULAR

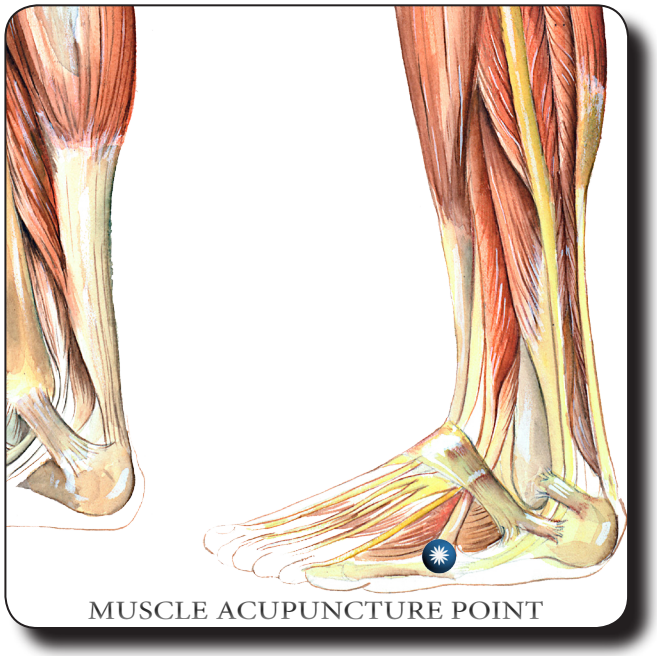


NEUROLYMPHATIC



VOR I

VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 484: PRONATOR TERES, (Humeral Division)

ORIGIN: Just superior to medial condyle of humerus and tendon common to wrist flexors.

INSERTION: Middle of lateral surface of radius.

ACTION: Pronates forearm. Primarily moves at full extension.

TEST:

Patient: Supine. Pronate arm completely. Arm held at full extension position.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral elbow.
Contact: Wrist to supinate forearm.

NEUROVASCULAR: (Lat) Maxillary bone, just above 1st molar.

NEUROLYMPHATIC: (Post/L) 8th ICS, at the spine.

VISCERAL ORGAN:

I. *Adrenals:* (Ant/BL) Abdomen, 1" inferior and 1" lateral to umbilicus.

II. *Vaginal Vault/Penis:* (Ant/BL) Rectus Abdominis, 1st section, K14, 1" lateral to midline.

M. A. P. : B64

V.L. : T9L

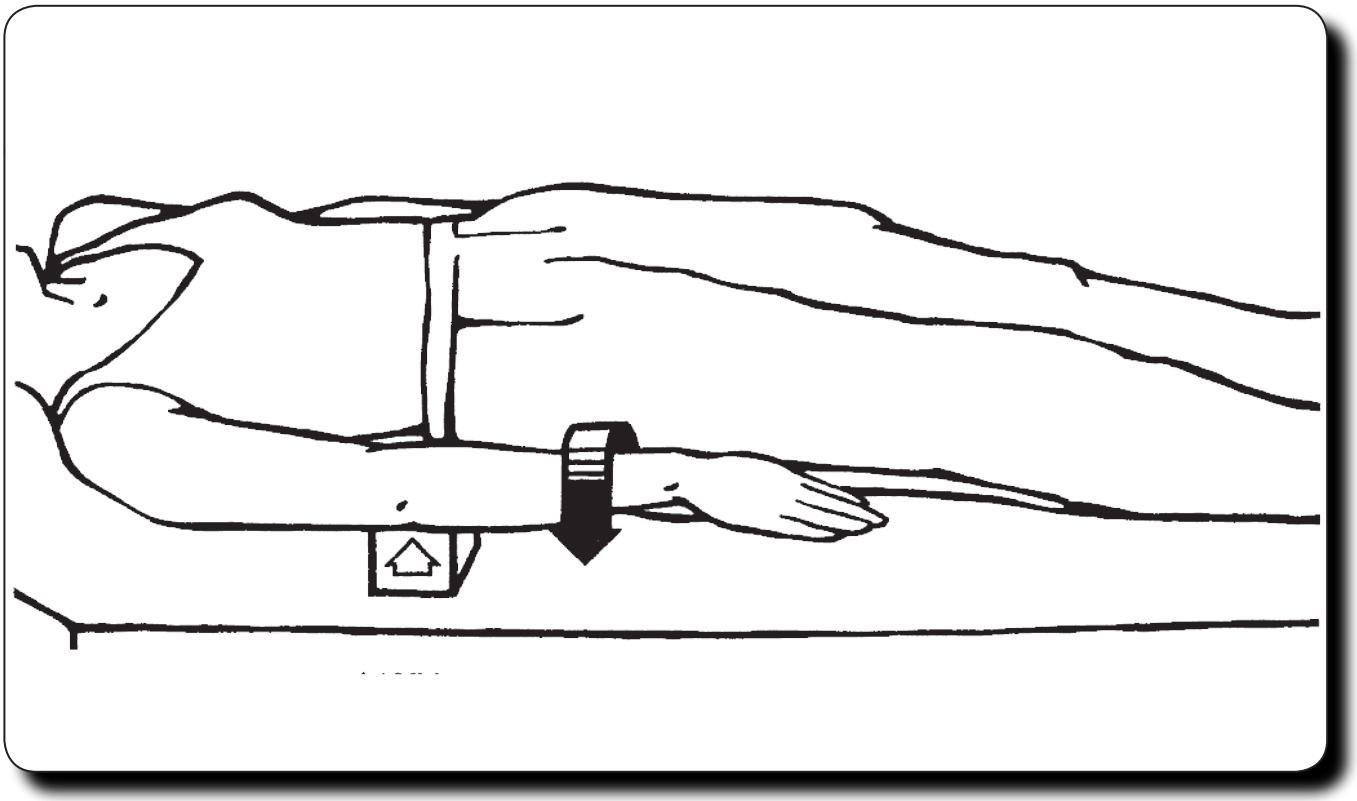
L. B. V.L. : T2L

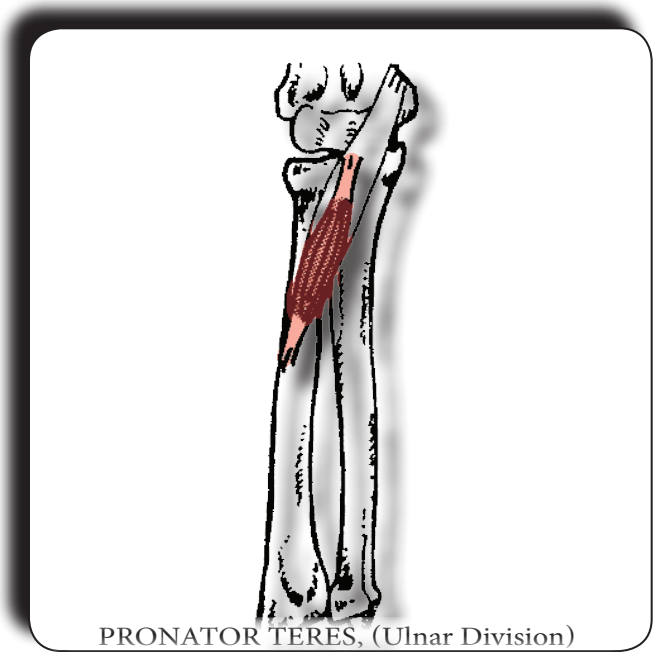
M. M. : C7

CRANIAL: Temporal

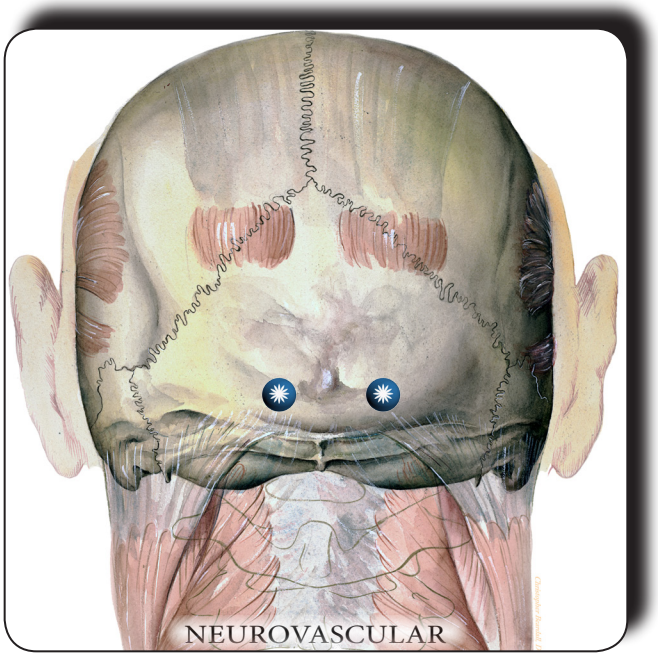
FOOT: Cuboid

NUTRIENT SOURCE:
1. Renafood (S)

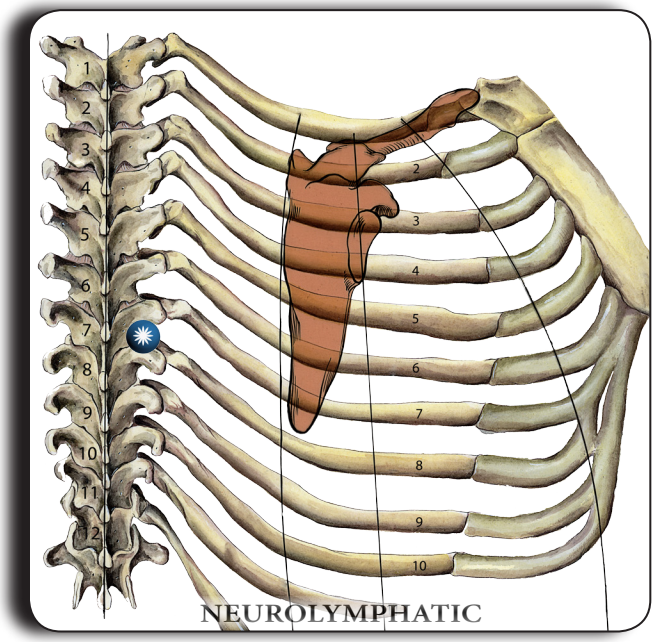




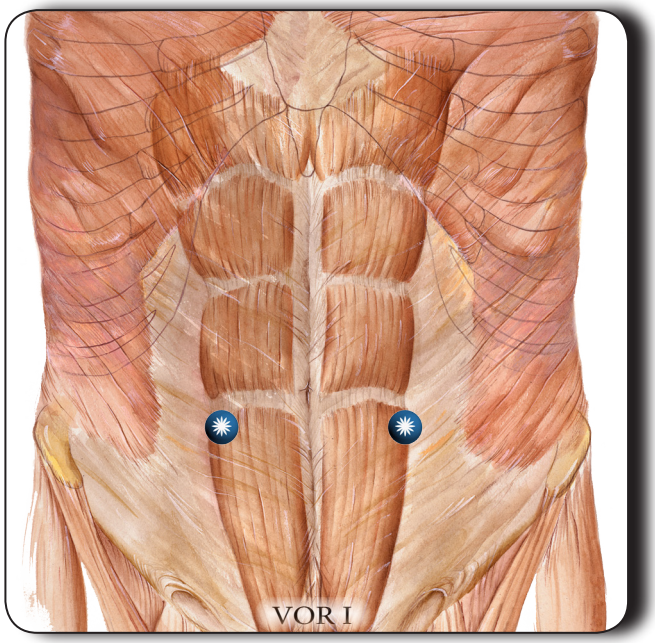
PRONATOR TERES, (Ulnar Division)



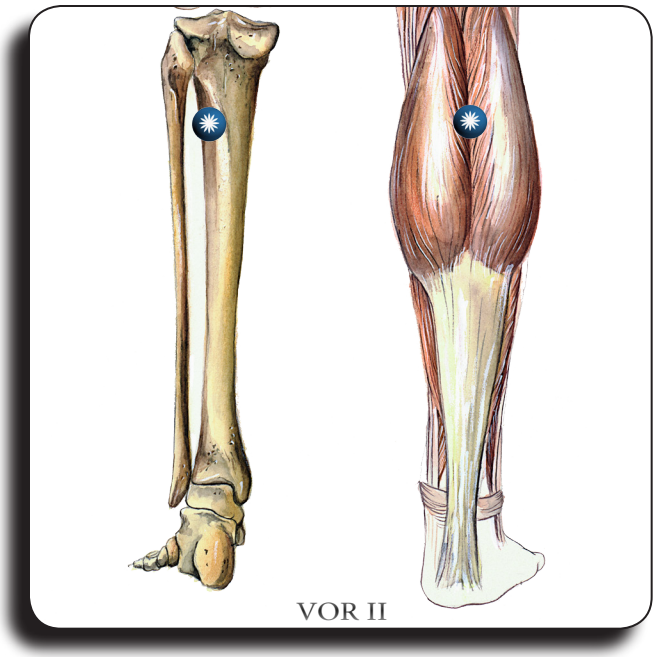
NEUROVASCULAR



NEUROLYMPHATIC



VOR I



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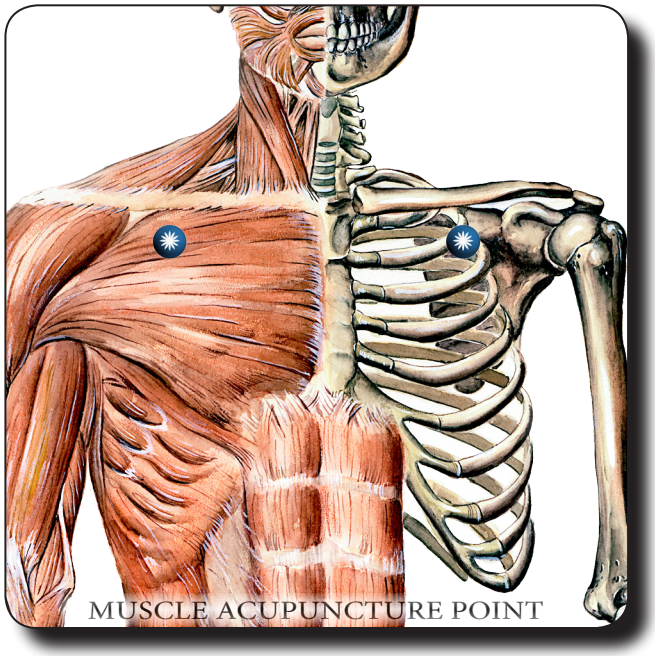


MUSCLE ACUPUNCTURE POINT

Muscle 486: PRONATOR TERES, (Ulnar Division)

ORIGIN: (Deep Division) Medial side of coronoid process of ulna.

INSERTION: Middle of lateral surface of radius.

ACTION: Pronator of the forearm at 45 degrees flexion.

TEST:

Patient: Supine. Pronate arm completely. Flex forearm on arm 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Cup ipsilateral elbow.
Contact: Wrist to supinate forearm.

NEUROVASCULAR: (Post/BL) Occipital bone, lateral to midline at level of EOP.

NEUROLYMPHATIC: (Post/R) 7th ICS, 1" lateral to spine.

VISCERAL ORGAN:

I. *Kidney:* (Ant/BL) Rectus Abdominis, first section, near lateral border of insertion.

II. *Posterior Pituitary:* (Post/BL) Calf, posterior aspect, B56.

M. A. P. : St14

V.L. : T2R

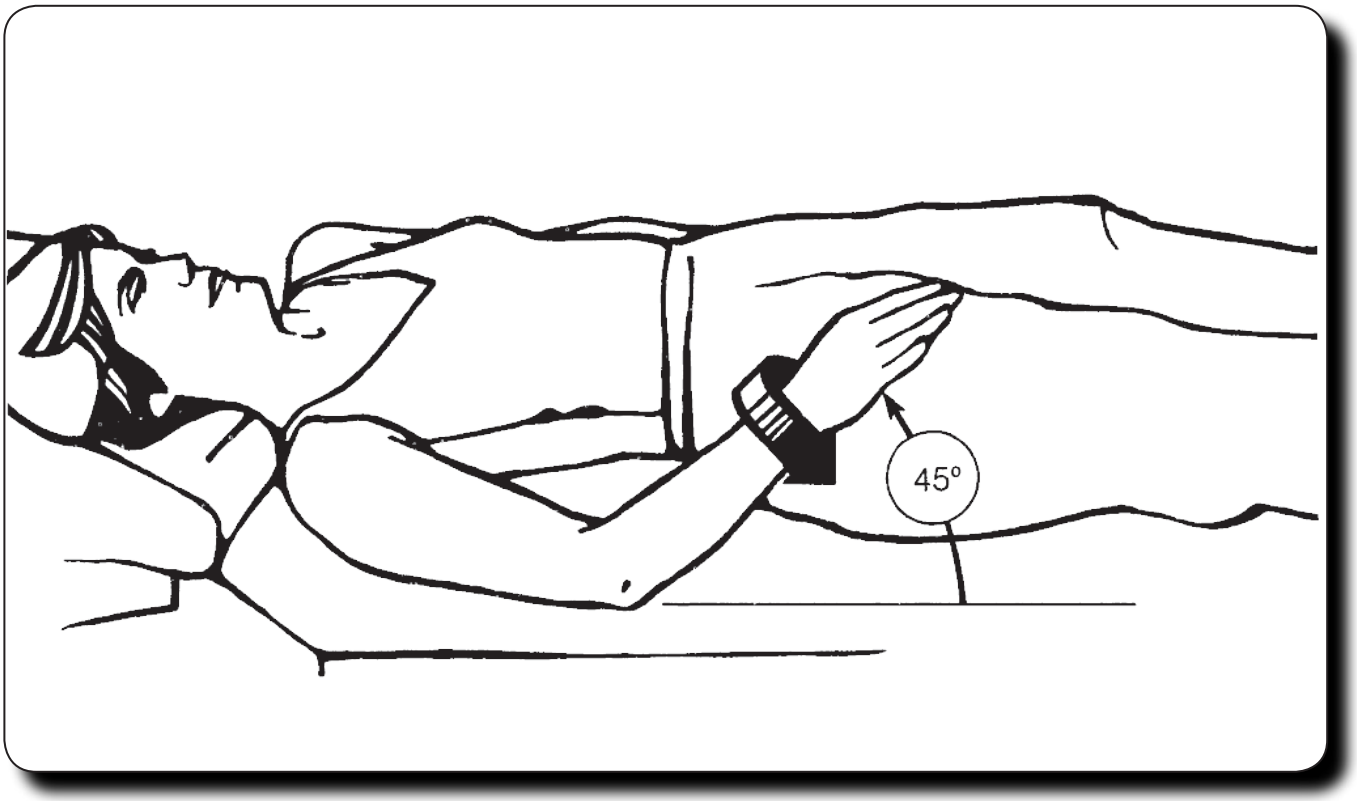
L. B. V.L. : T9R

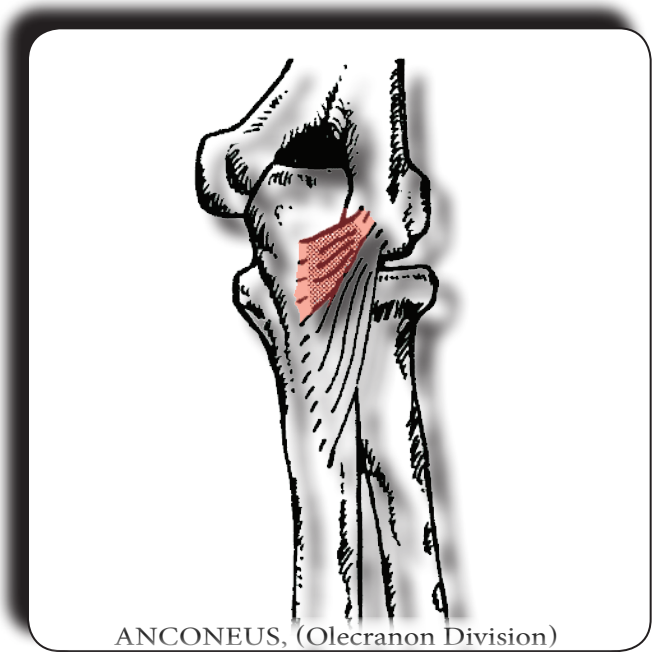
M. M. : C7

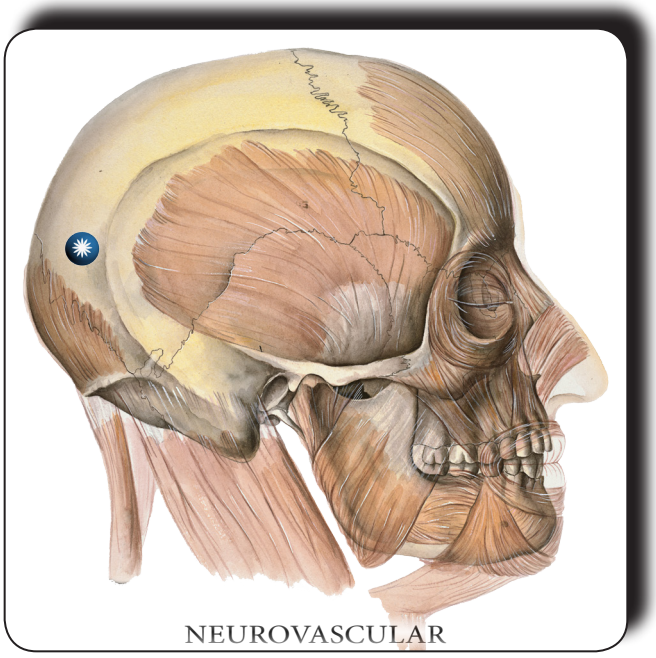
CRANIAL: Sphenoid

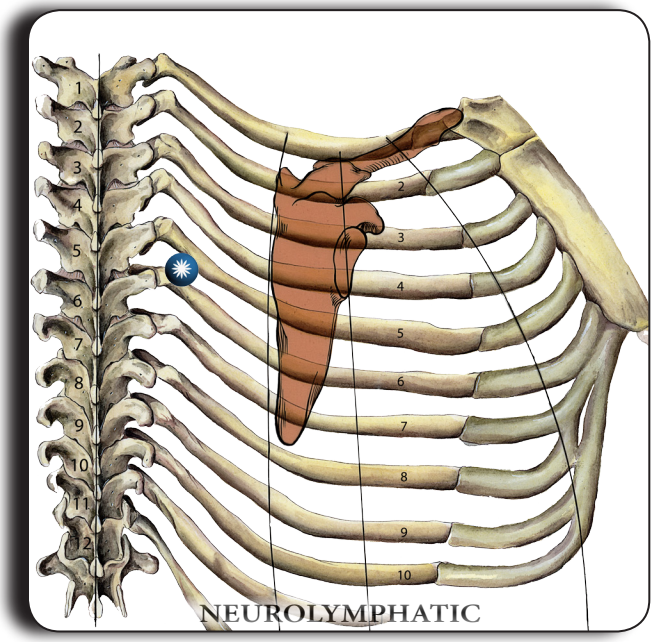
FOOT: 3rd Metatarsal

NUTRIENT SOURCE:
1. Allorganic Trace Minerals (S)




ANCONEUS, (Olecranon Division)


NEUROVASCULAR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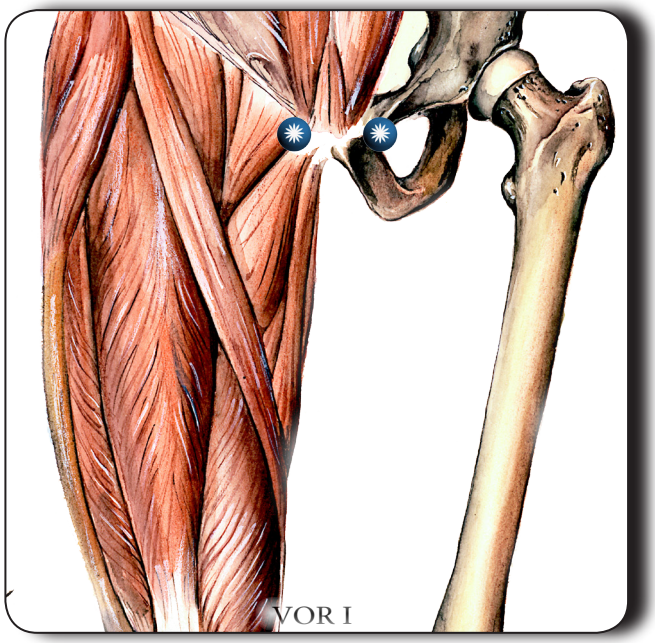
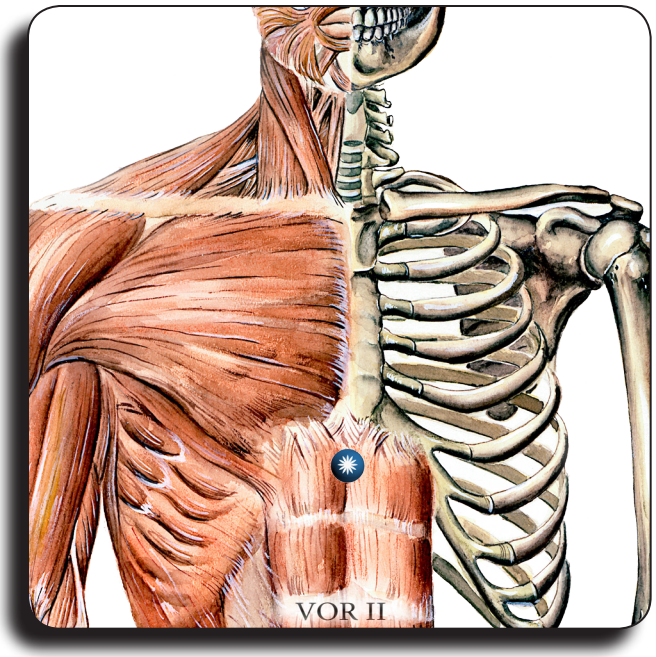
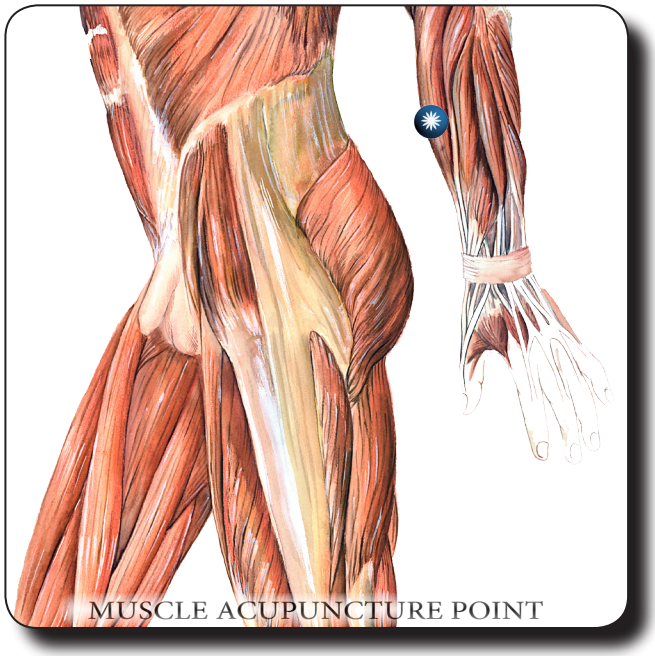
NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 488: ANCONEUS, (Olecranon Division)

ORIGIN: Lateral epicondyle of humerus.

INSERTION: Lateral side of olecranon.

ACTION: Extends the forearm on arm.

TEST:

Patient: Supine. Flex 10 degrees and supinate forearm on arm.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral elbow.
Contact: Distal dorsal surface of forearm to flex forearm on arm through sagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, posterior superior aspect, along the superior temporal line.

NEUROLYMPHATIC: (Post/R) 5th ICS, 1" lateral to transverse process.

VISCERAL ORGAN:

I. *Bladder:* (Ant/BL) Pelvis, Pubic area, superior ramus, just lateral to Adductor Brevis origin.

II. *Heart:* (Ant/Midline) Abdomen, superior aspect, Cv16, tip of xiphoid process.

M. A. P. : Li9

V.L. : L4R

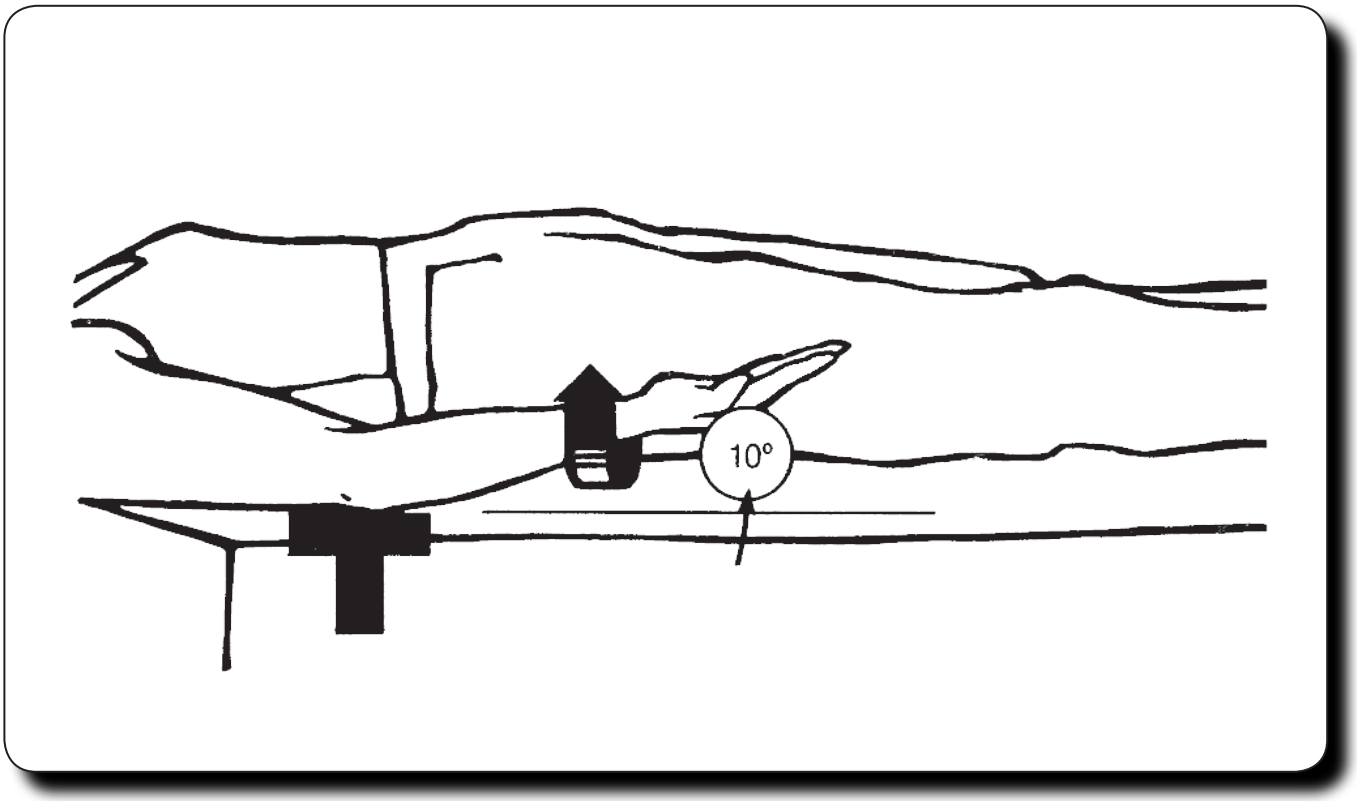
L. B. V.L. : C2R

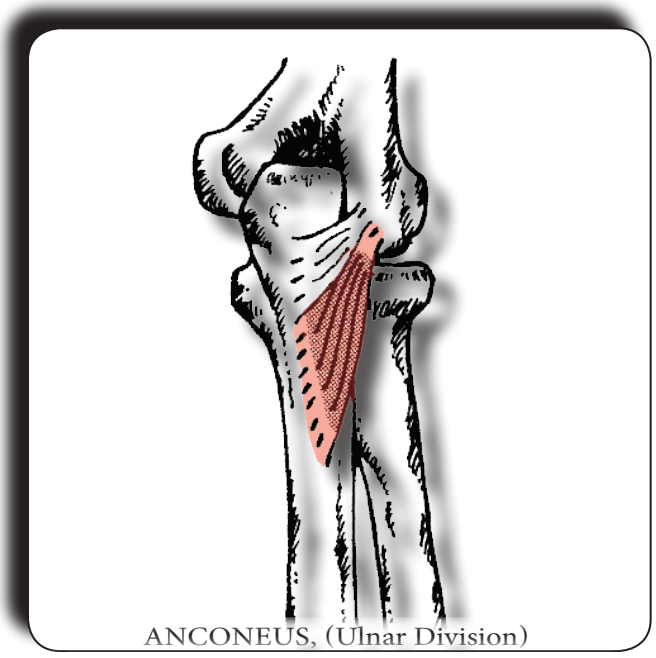
M. M. : T1

CRANIAL: In Research

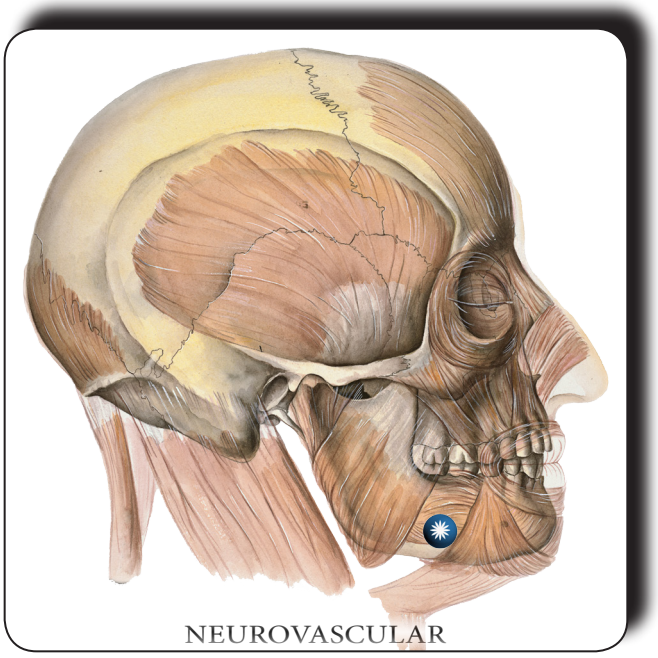
FOOT: In Research

NUTRIENT SOURCE:
1. Complex F (Perles) (S)

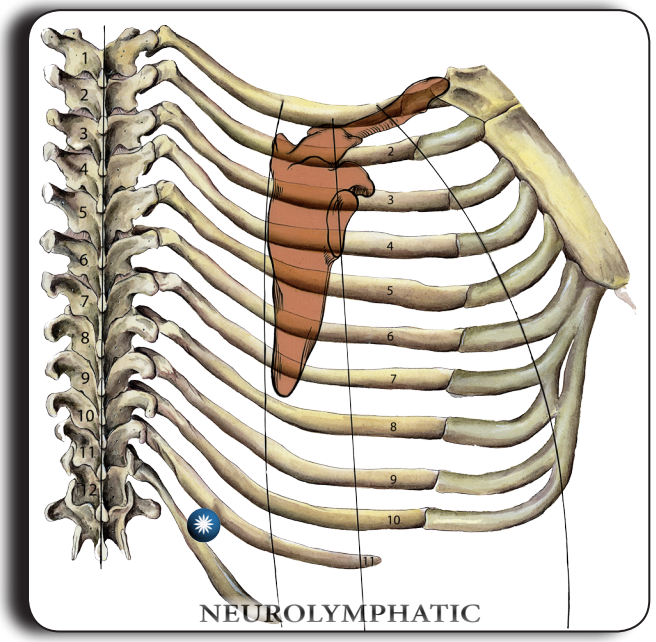




ANCONEUS, (Ulnar Division)



NEUROVASCULAR



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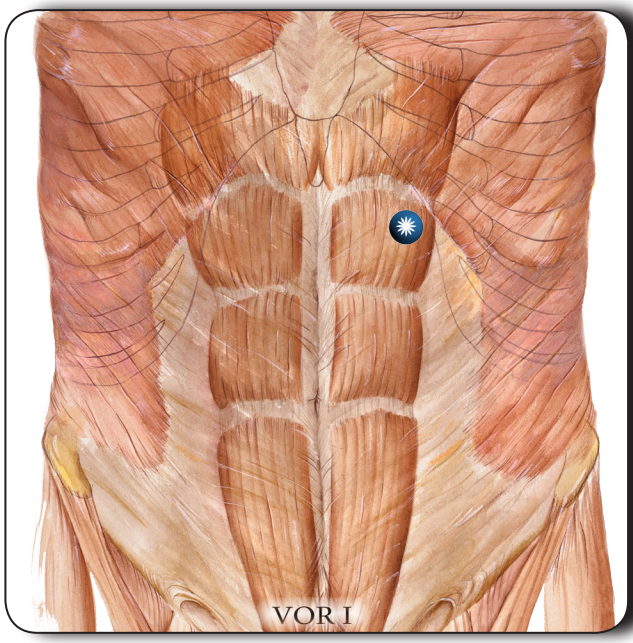
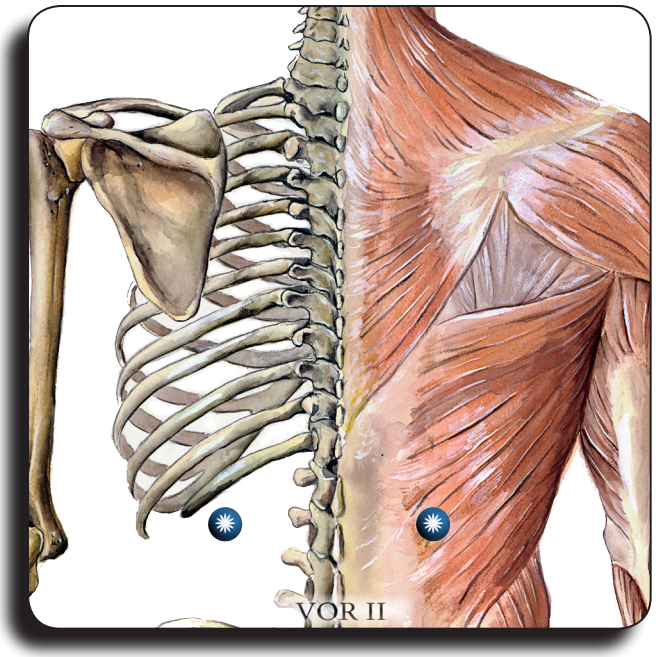
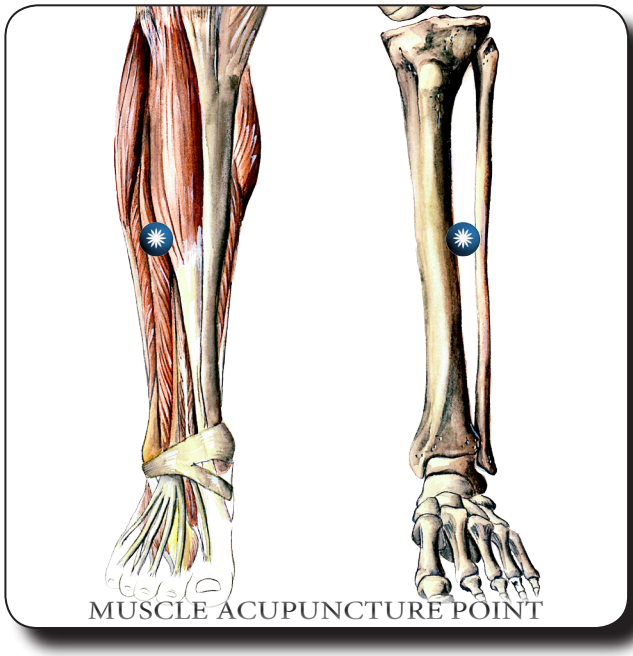


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 490: ANCONEUS, (Ulnar Division)

ORIGIN: Lateral epicondyle of humerus.

INSERTION: Upper fourth of dorsal surface of ulna.

ACTION: Extends the forearm on arm.

TEST:

Patient: Supine. Extend and supinate forearm on arm.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral elbow.
Contact: Distal dorsal surface of forearm to flex forearm on arm through sagittal plane.

NEUROVASCULAR: (Lat) Mandible, posterior aspect halfway between angle and mental prominence.

NEUROLYMPHATIC: (Post/R) 11th ICS, 3-4" lateral to spine .

VISCERAL ORGAN:

I. *Pancreatic duct system:* (Ant/L) Rectus Abdominis, 3rd section, superior lateral portion.

II. *Gallbladder Lymphatics:* (Post/BL) Ribcage, posterior aspect, 1" medial to tip of 12th rib on inferior side, B52.

M. A. P. : St39.5

V.L. : T7R

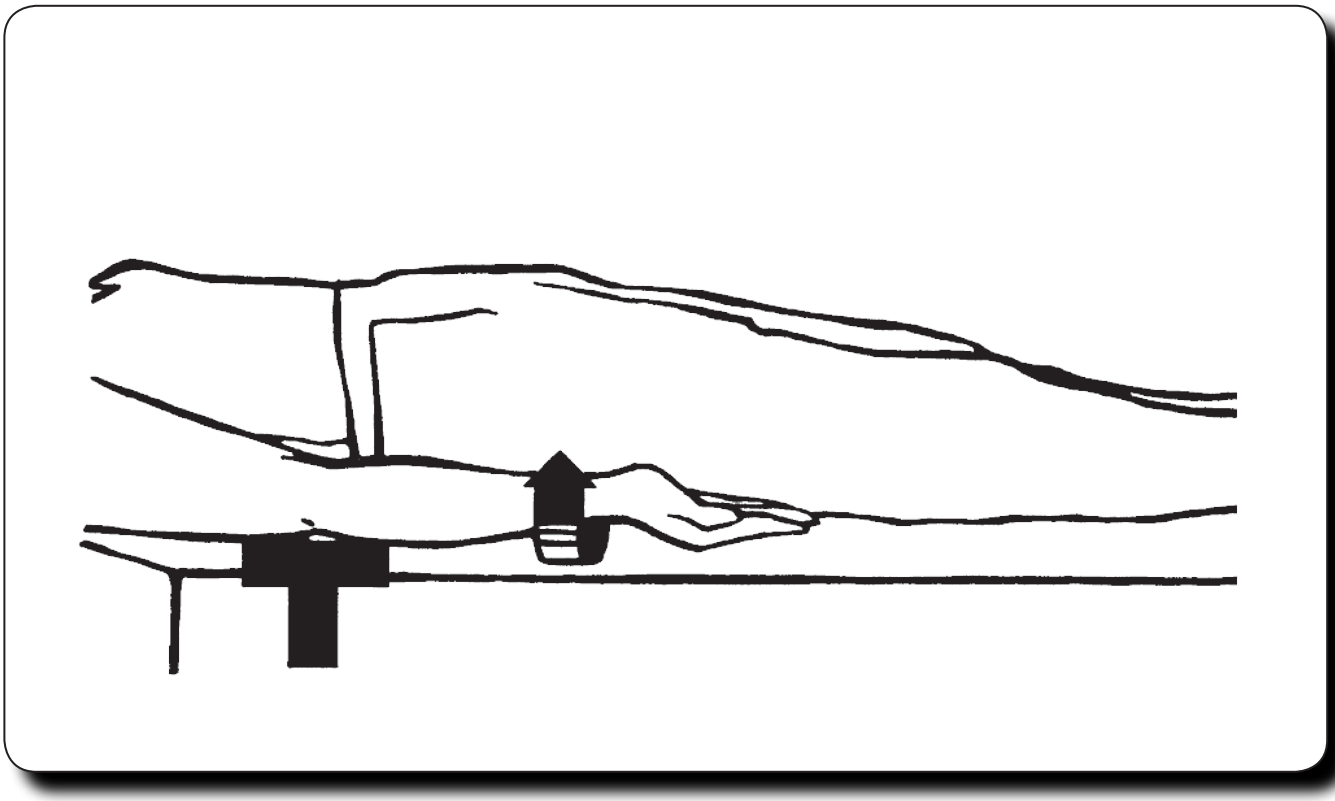
L. B. V.L. : T4 R

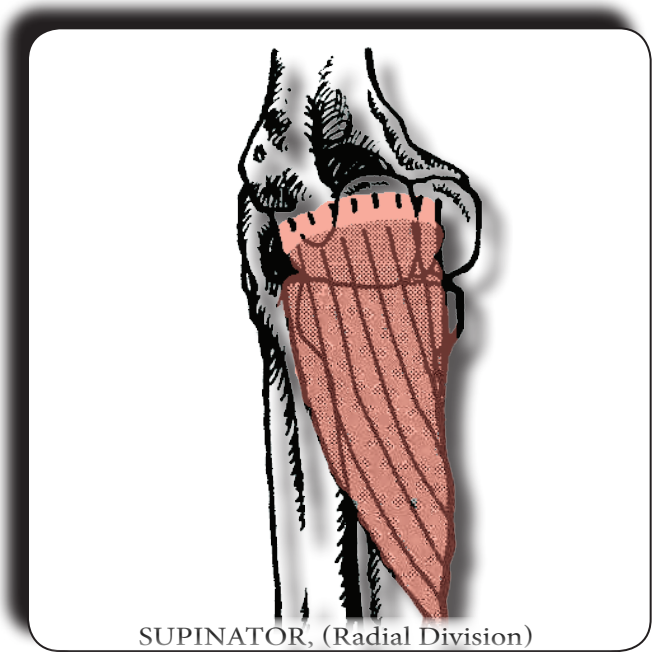
M. M. : T1

CRANIAL: Sphenoid

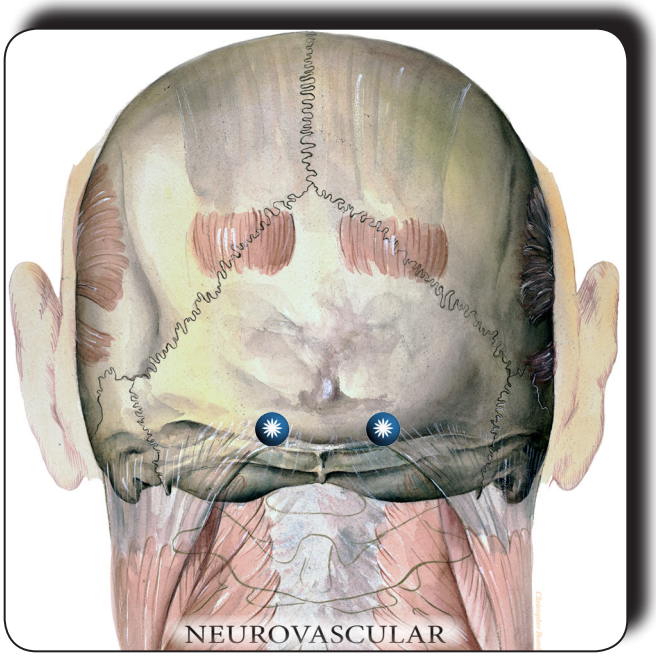
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. Fengre (S)

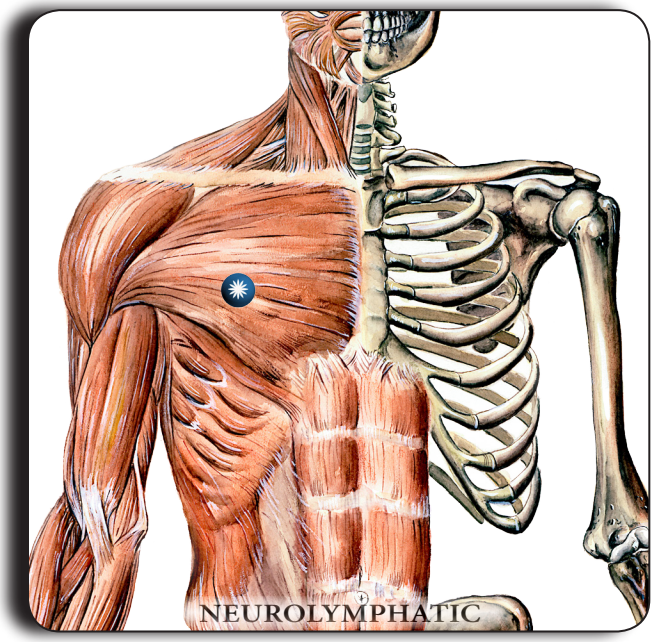




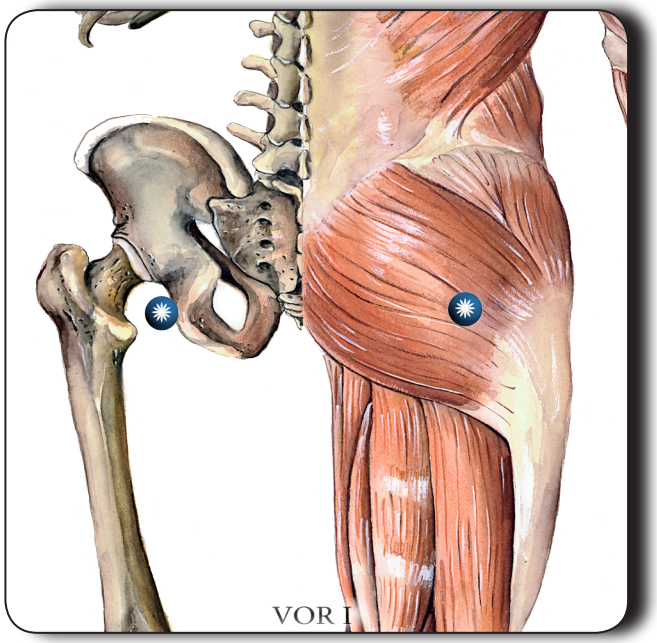
SUPINATOR, (Radial Division)



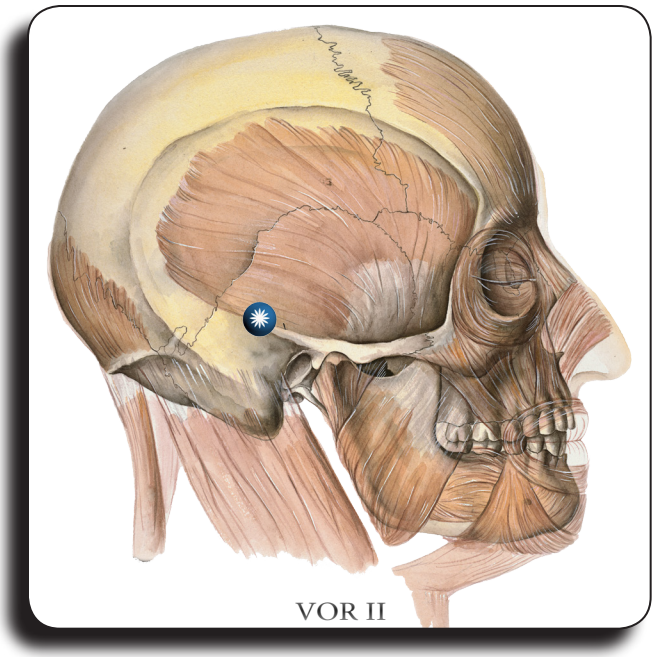
NEUROVASCULAR



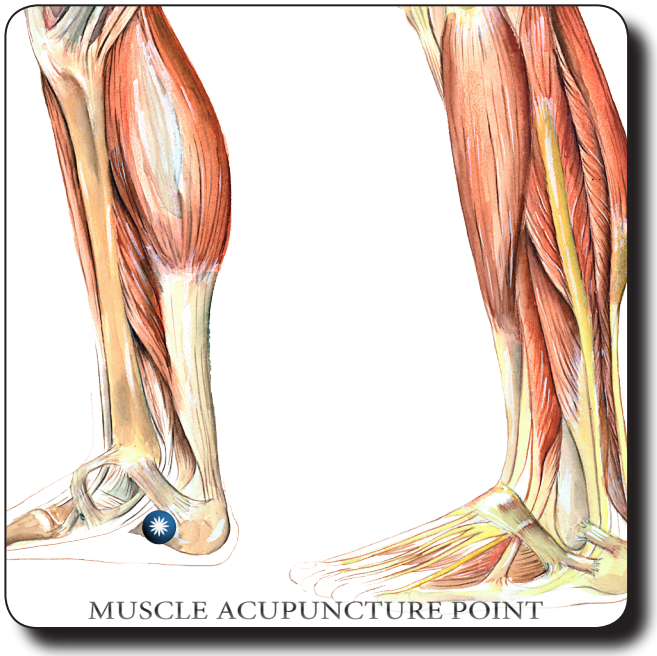
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 492: SUPINATOR, (Radial Division)

ORIGIN: Lateral epicondyle of humerus, radial collateral ligament, annular ligament.

INSERTION: Lateral edge of radial tuberosity and oblique line of radius.

ACTION: Supinates the forearm on arm.

TEST:

Patient: Supine. Completely supinate and flex forearm on arm 45 degrees.

Doctor: Position: Ipsilateral.
Brace: Ipsilateral elbow.
Contact: Ipsilateral wrist to pronate forearm on arm.

NEUROVASCULAR: (Post/BL) Occipital bone, 1" inferior and 1" lateral to EOP.

NEUROLYMPHATIC: (Ant/R) 3rd ICS, 4" lateral to sternum.

VISCERAL ORGAN:

I. *Gonads:* (Post/BL) Pelvis, posterior aspect, 1-2" medial to G30.

II. *Ear:* (Lat/BL) Temporal bone, squamosal portion, Tw19, posterior and superior to EAC.

M. A. P. : K3

V.L. : T5R

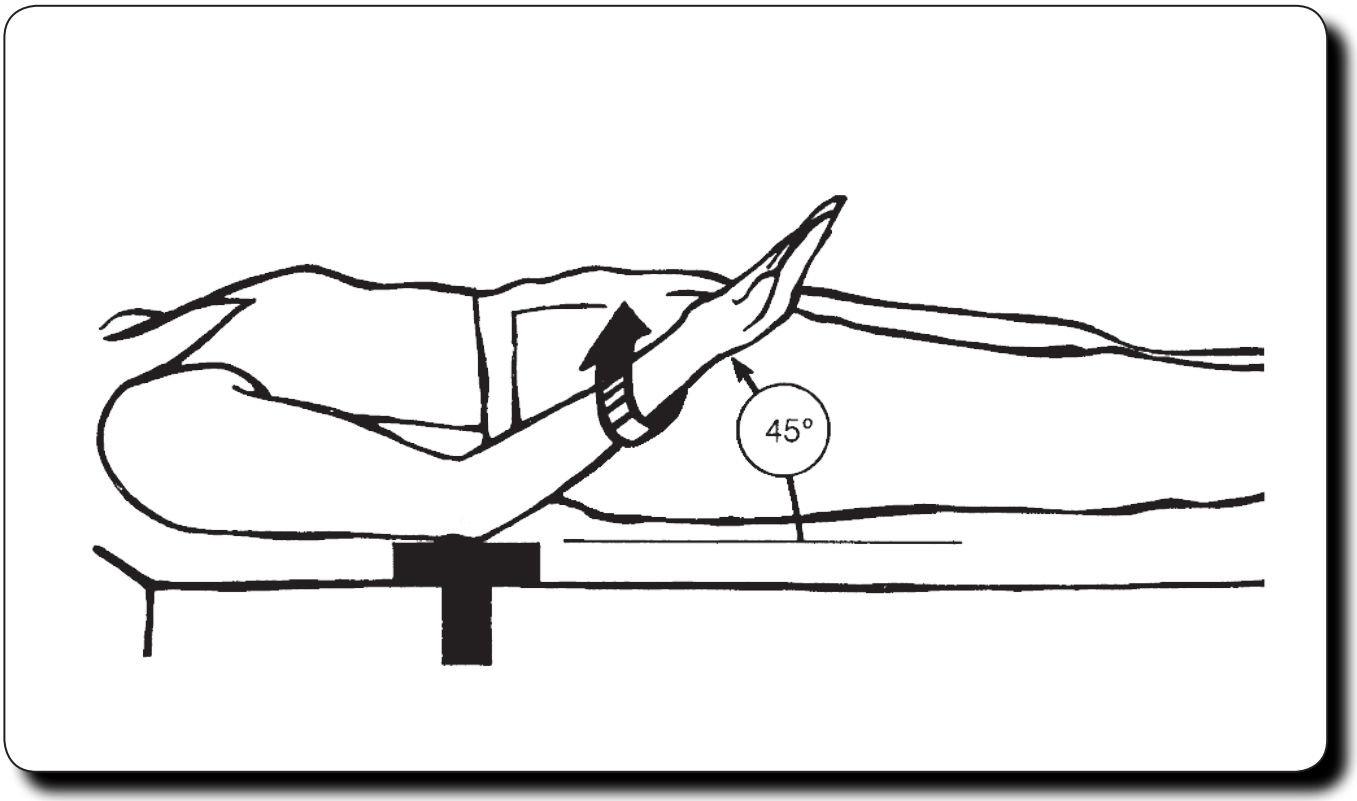
L. B. V.L. : T6R

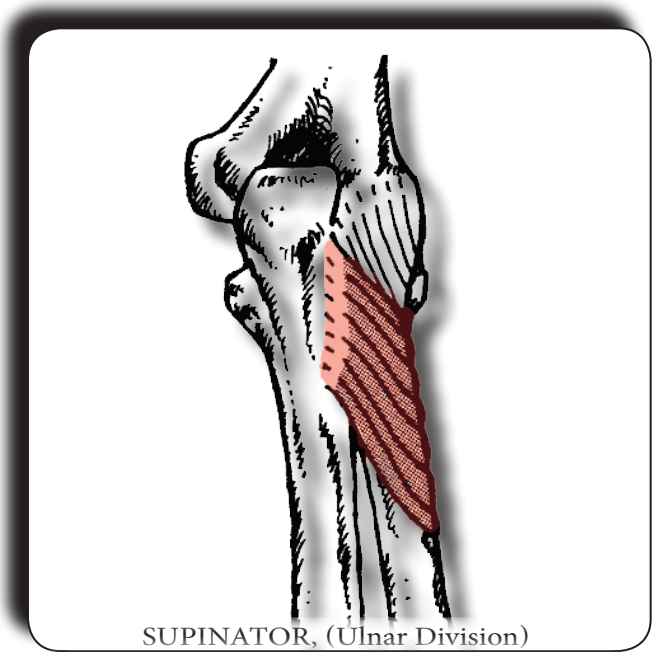
M. M. : C7

CRANIAL: Frontal

FOOT: Navicular

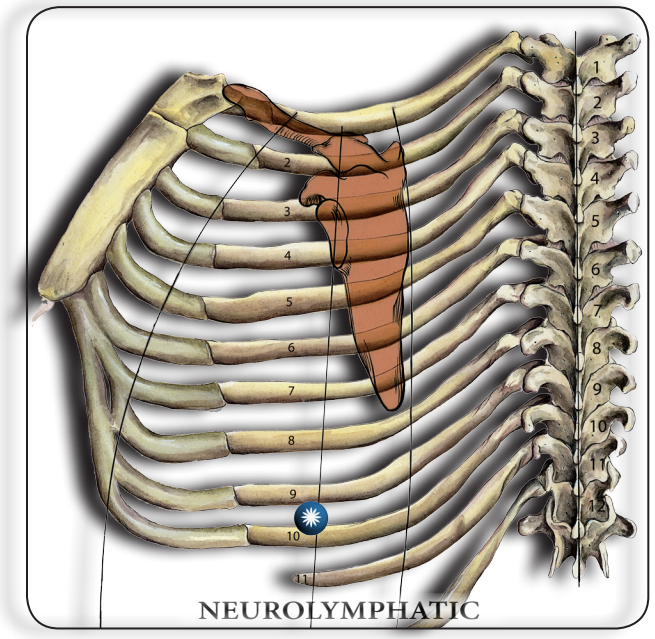
NUTRIENT SOURCE:
1. Linum B6 (S)





SUPINATOR, (Ulnar Division)

NEUROVASCULAR



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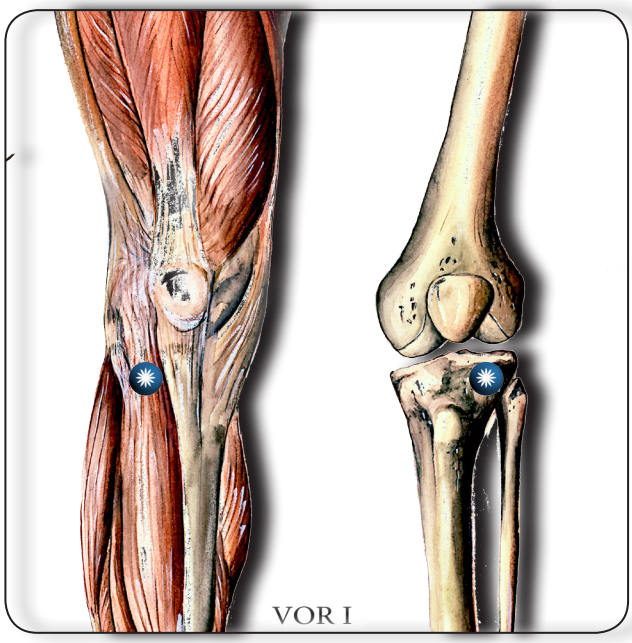
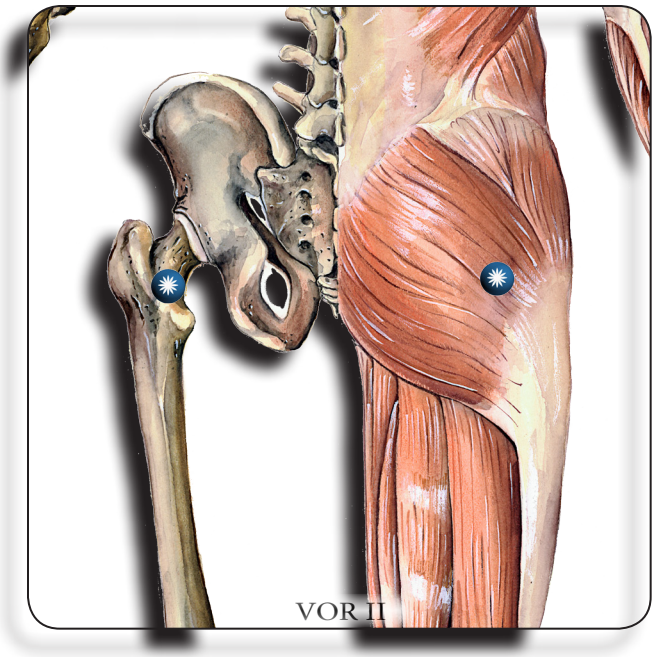
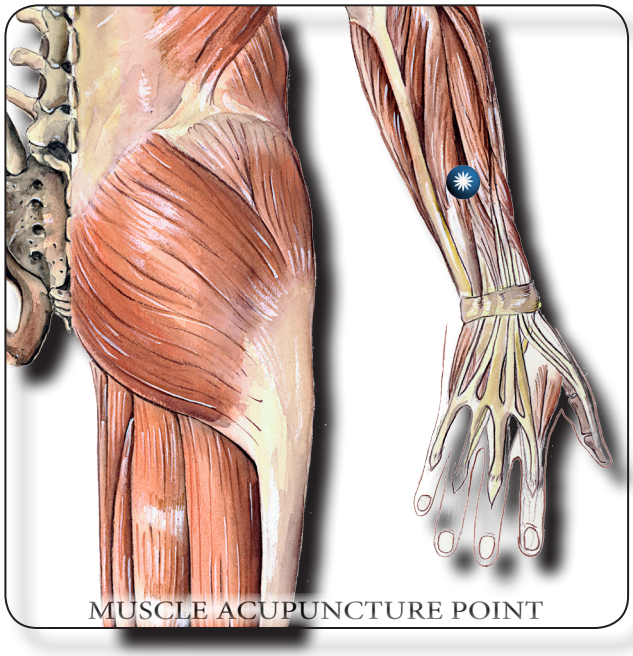


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 494: SUPINATOR, (Ulnar Division)

ORIGIN: Ridge of ulna.

INSERTION: Lateral edge of radial tuberosity and oblique line of radius.

ACTION: Supinates forearm on arm.

TEST:

Patient: Supine. Completely supinate forearm, flex elbow 110 degrees.

Doctor: Position: Ipsilateral
Brace: Cup ipsilateral elbow
Contact: Wrist to pronate forearm on arm.

NEUROVASCULAR: (Ant/Midline) Frontal bone, anterior aspect, midline, 3" superior to glabella.

NEUROLYMPHATIC: (Lat/L) 9th ICS, 2" posterior to costocartilage junction.

VISCERAL ORGAN:

I. *Prostate/Uterus:* (Ant/BL) Knee, anterior aspect, St35.5, near origin of Tibialis Anterior.

II. *Liver:* (Post/BL) Pelvis, posterior aspect, belly of muscle Gluteus Maximus between G30 and B49.

M. A. P. : Tw6

V.L. : T2R

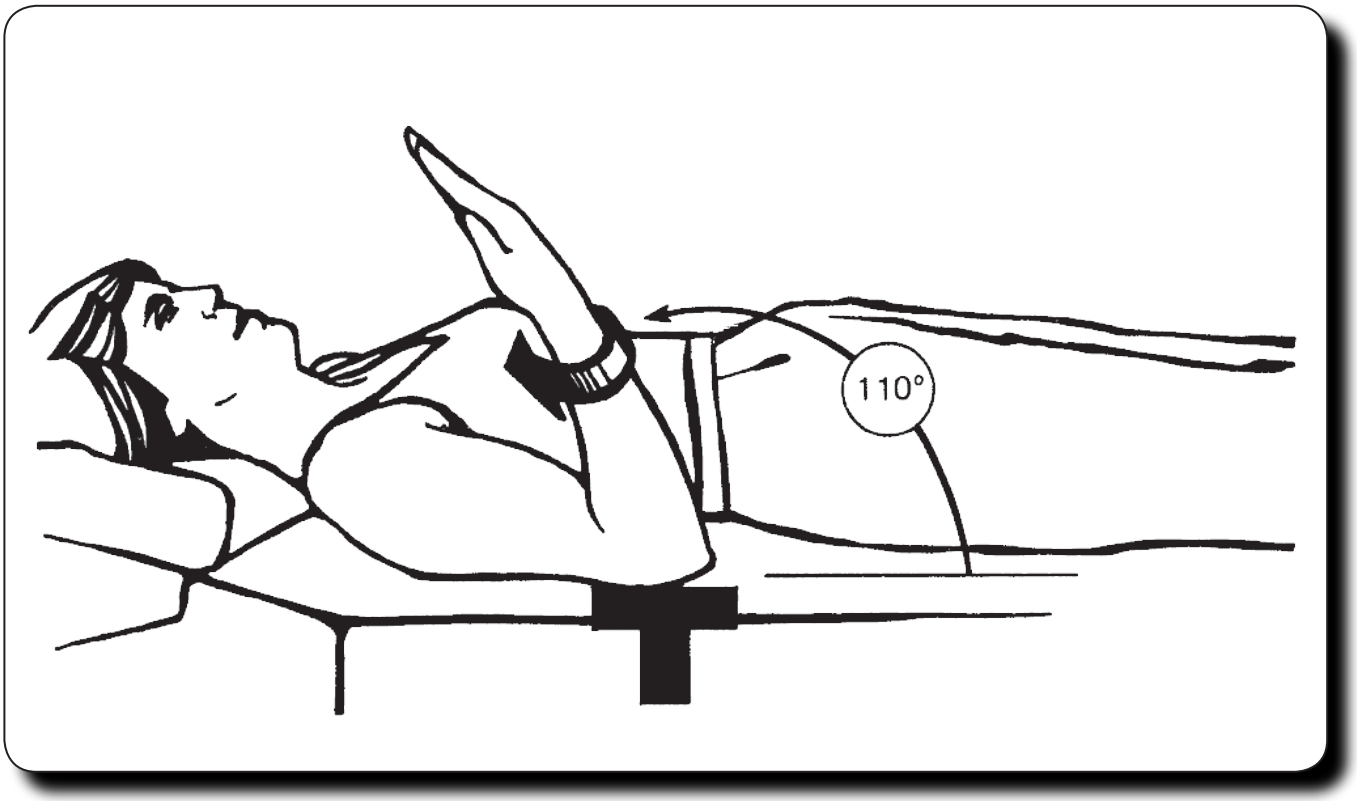
L. B. V.L. : T9R

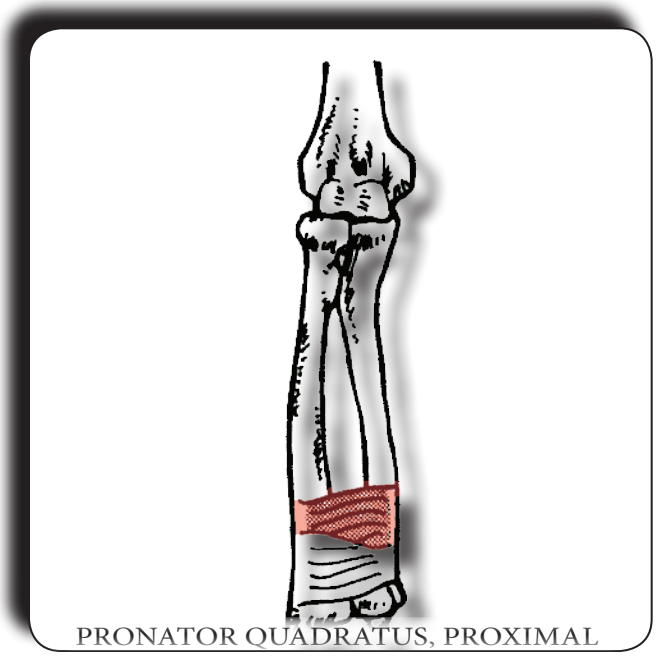
M. M. : C7

CRANIAL: Sphenoid

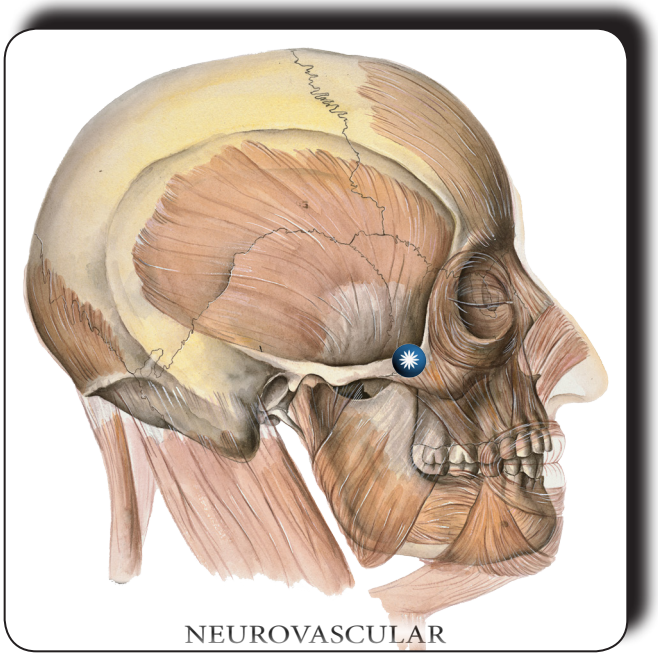
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. CalSol (S)

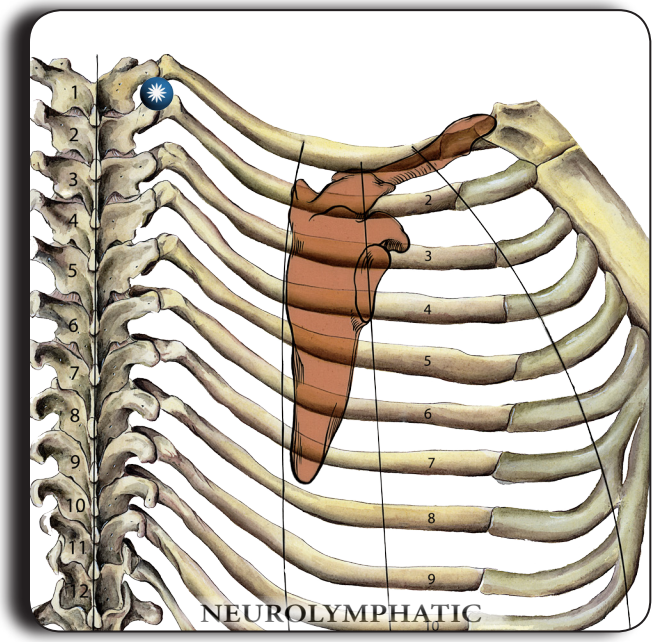




PRONATOR QUADRATUS, PROXIMAL

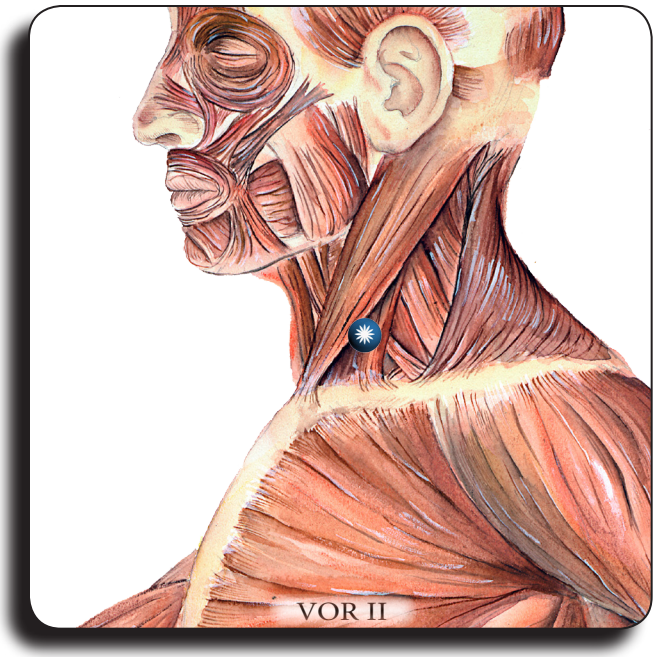


NEUROVASCULAR

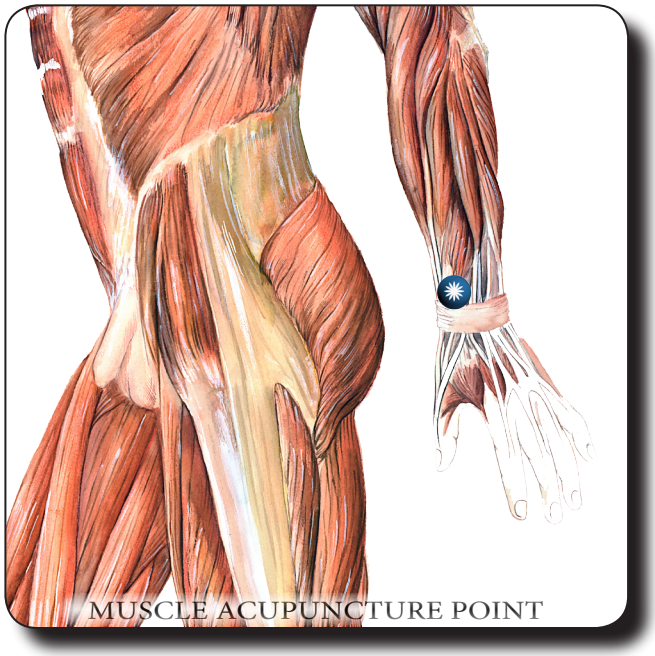


NEUROLYMPHATIC

VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 496: PRONATOR QUADRATUS, (Proximal Division)

ORIGIN: Proximal fibers from the lower anterior surface of ulna.

INSERTION: Triangular area superior to ulna notch of radius.

ACTION: Principle pronator of the forearm at 90 degrees.

TEST:

Patient: Supine. Pronate forearm completely. Flex forearm on arm 90 degrees.

Doctor: Position: Ipsilateral.
Brace: Cup ipsilateral elbow.
Contact: Ipsilateral wrist to supinate forearm.

NEUROVASCULAR: (Lat) Temporal bone, zygomatic process near its junction with zygoma.

NEUROLYMPHATIC: (Post/R) 1st ICS, at transverse process.

VISCERAL ORGAN:

I. *Stomach - fundus:* (Ant/R) Rectus Abdominis, 3rd section, near insertion, 1/2" lateral to linea alba.

II. *Eustachian Tube:* (Lat/BL) Neck, anterior aspect, SCM, muscle belly superior and lateral to Li17.

M. A. P. : Li5.5

V.L. : T5R

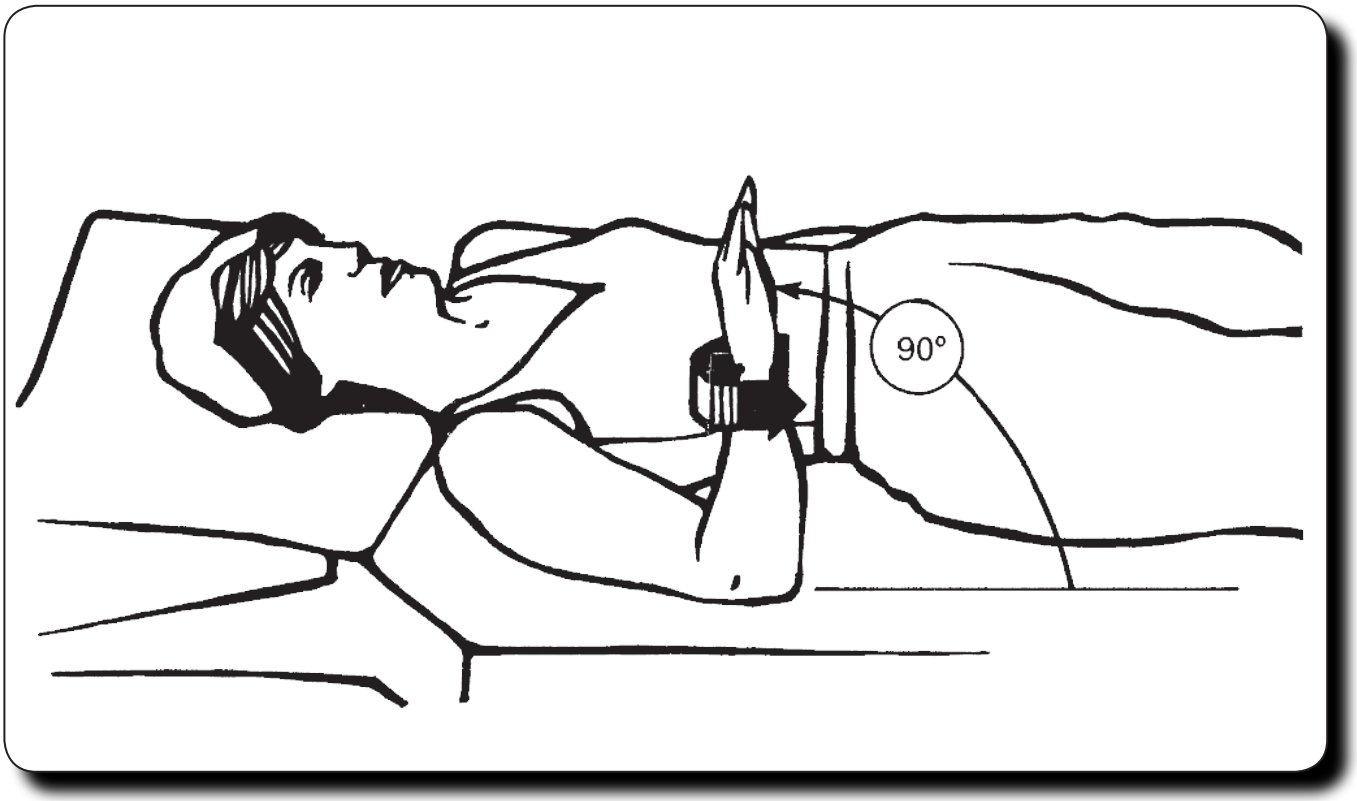
L. B. V.L. : T6R

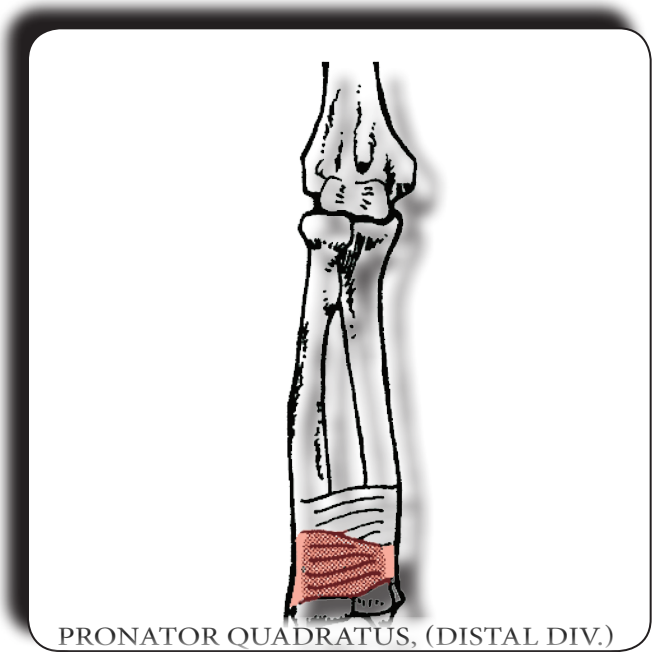
M. M. : C7

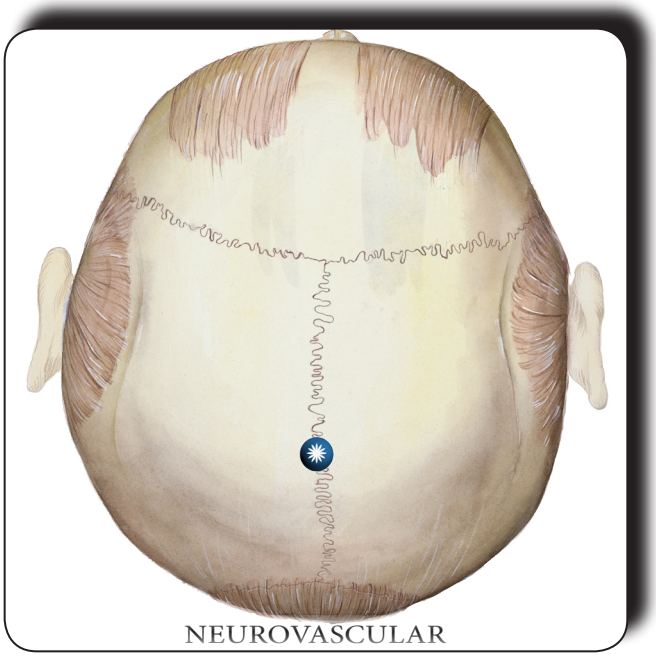
CRANIAL: Maxillary

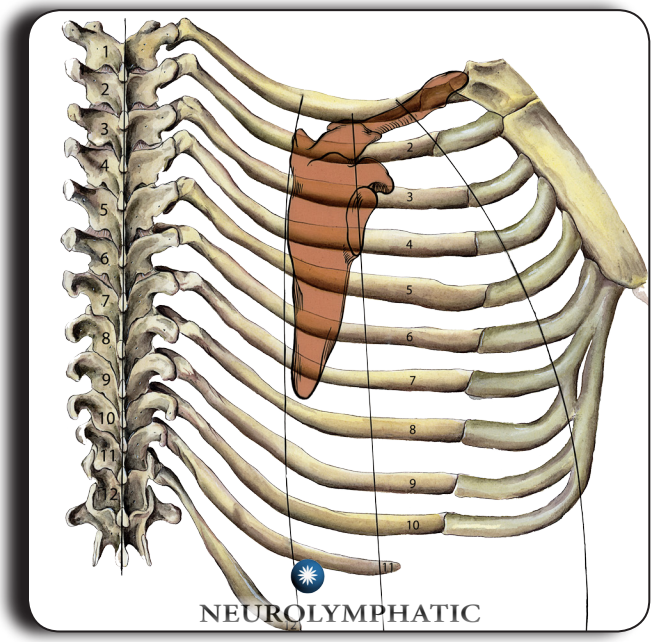
FOOT: 5th Metatarsal

NUTRIENT SOURCE:
1. Complex G (S)




PRONATOR QUADRATUS, (DISTAL DIV.)

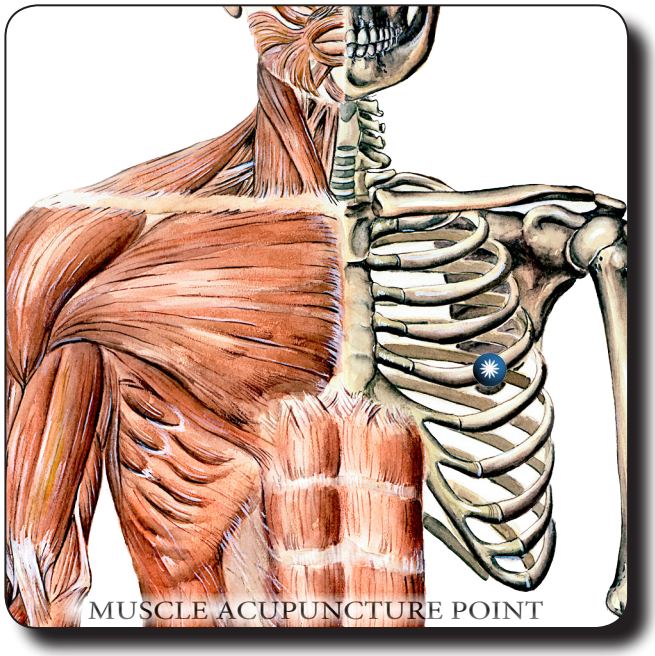

NEUROVASCULAR



NEUROLYMPHATIC

VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 498: PRONATOR QUADRATUS, (Distal Division)

ORIGIN: Oblique ridge on lower part of anterior surface of lower fourth of ulna.

INSERTION: Lower fourth of anterior border and surface of radius.

ACTION: Principle pronator of the forearm at 120 degrees.

TEST:

Patient: Supine. Pronate forearm completely and flex forearm on arm 120 degrees.

Doctor: Position: Ipsilateral.
Brace: Cup ipsilateral elbow.
Contact: Ipsilateral wrist to supinate forearm.

NEUROVASCULAR: (Sup/Midline) Cranium, superior aspect, sagittal suture, halfway between fontanelles.

NEUROLYMPHATIC: (Post/R) 11th ICS, mid-axillary area.

VISCERAL ORGAN:

I. *Maxillary sinuses:* (Ant/BL) Maxillary bone, St2, below eye.

II. *Kidney:* (Ant/BL) Rectus Abdominis, 2nd section, 1" superior to umbilicus and 3" lateral.

M. A. P. : St17.5

V.L. : T12L

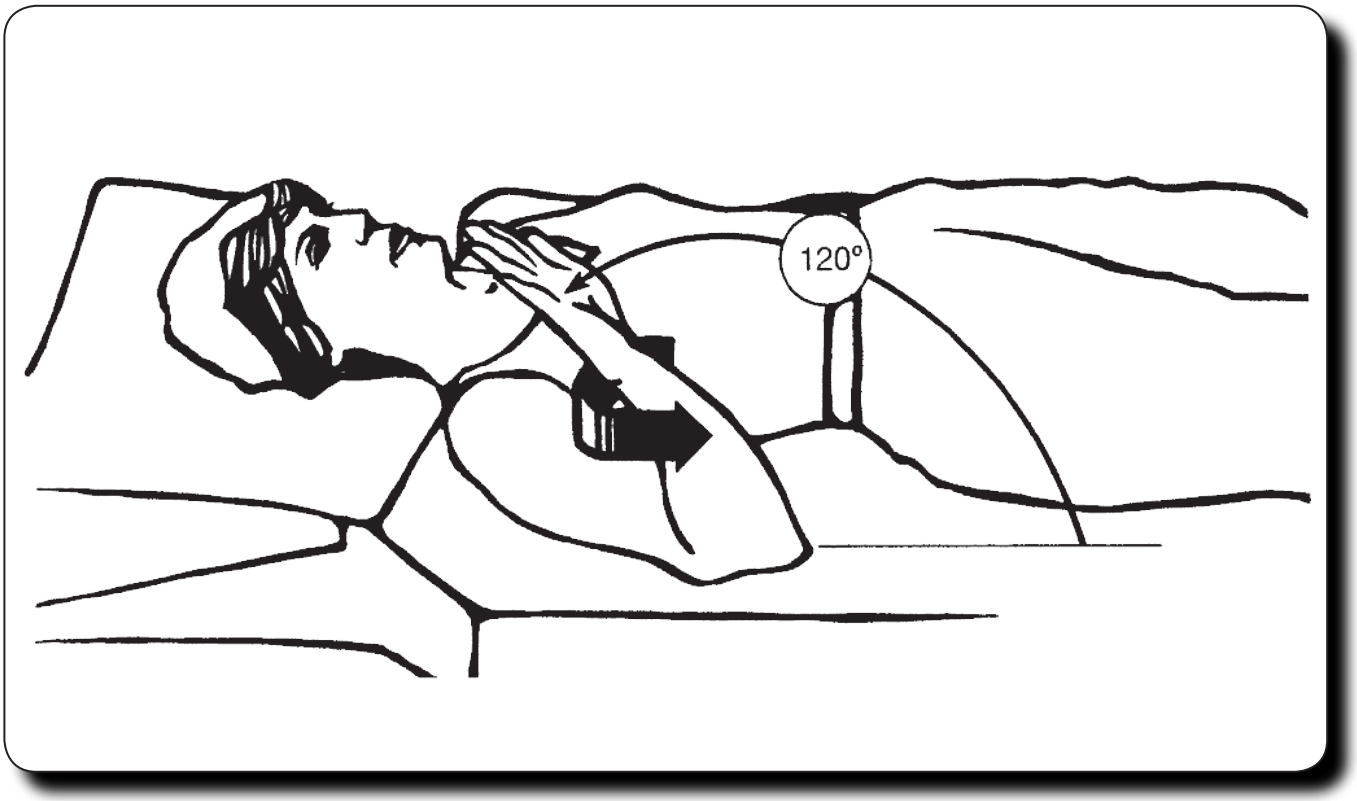
L. B. V.L. : C6L

M. M. : T1

CRANIAL: Maxillary

FOOT: 5th Metatarsal

NUTRIENT SOURCE:



Section III:

Wrist

Muscles Of Wrist

Muscle of the Upper Extremity that Insert on the Wrist

Origin: Humerus
(Flexors)

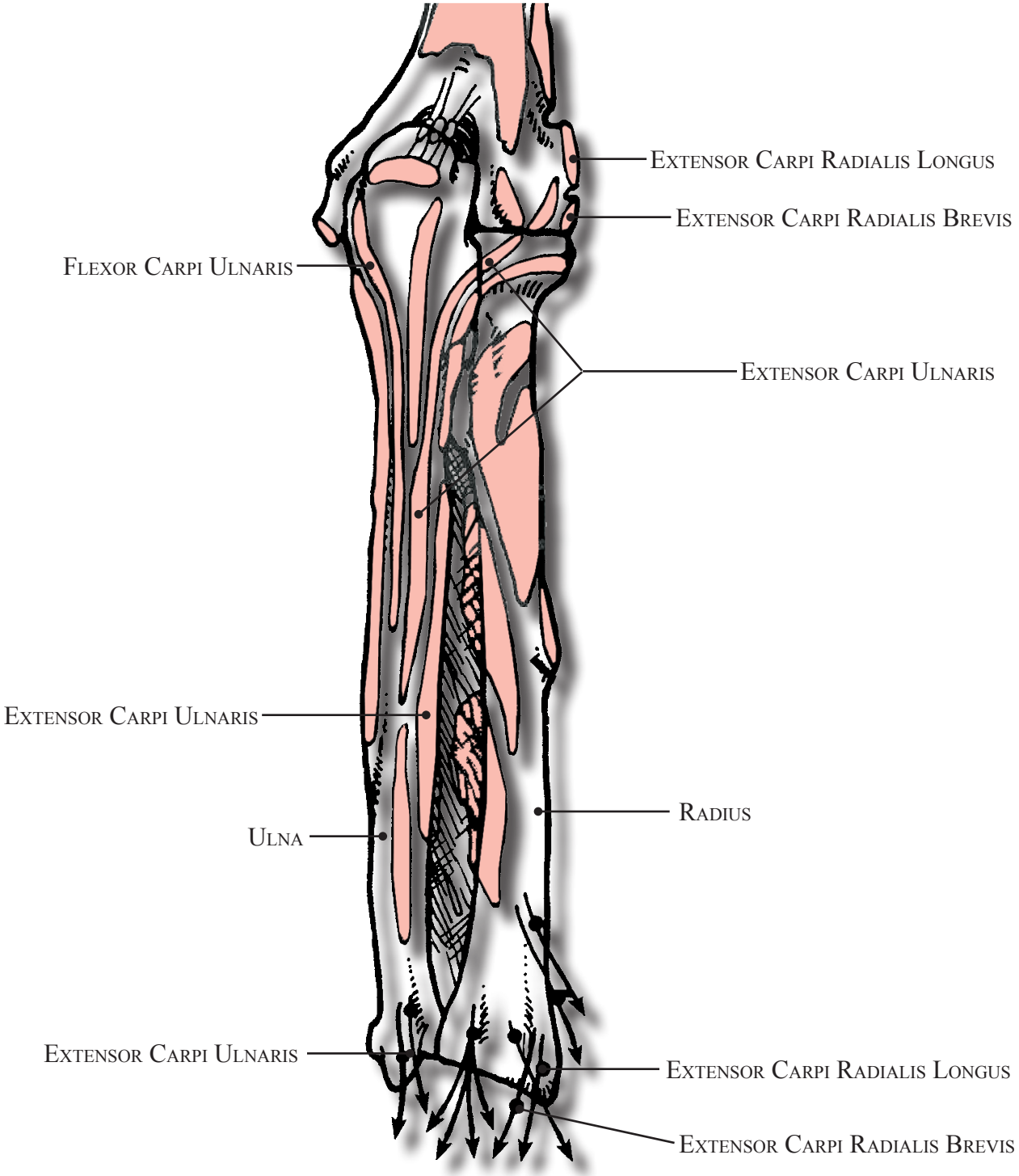
1. 500 Palmaris Longus
2. 502 Flexor Carpi Radialis, Abductor Division
3. 504 Flexor Carpi Radialis, Flexor Division
4. 506 Flexor Carpi Ulnaris, Flexor Division
5. 508 Flexor Carpi Ulnaris, Adductor Division

Origin: Humerus
(Extensors)

1. 510 Extensor Carpi Ulnaris, Adductor Division
2. 512 Extensor Carpi Ulnaris, Extensor Division
3. 514 Extensor Carpi Radialis Brevis
4. 516 Extensor Carpi Radialis Longus, Extensor Division
5. 518 Extensor Carpi Radialis Longus, Abductor Division

Origin and Insertion

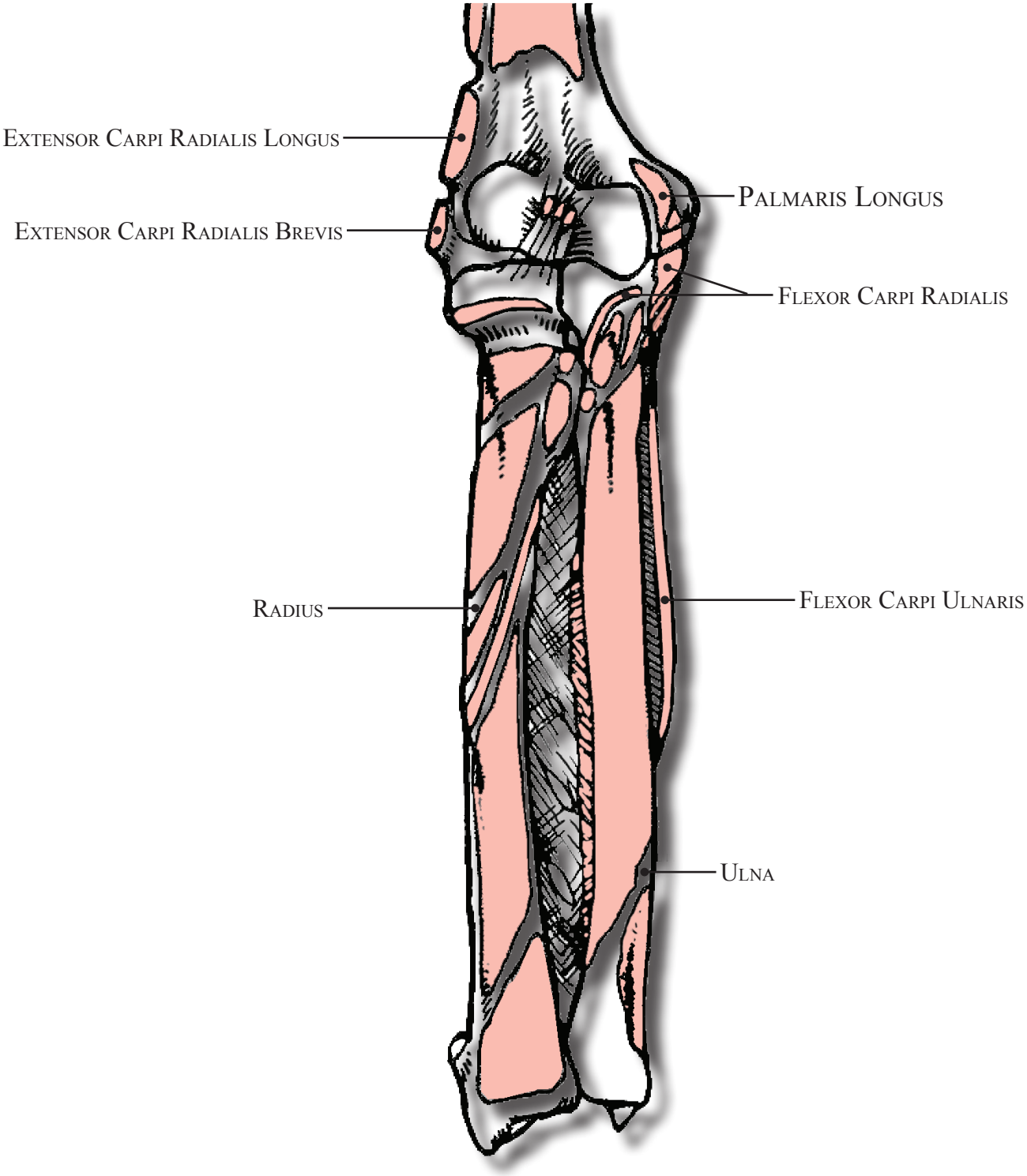
Wrist Muscles



Posterior View of Right Forearm

Origin and Insertion

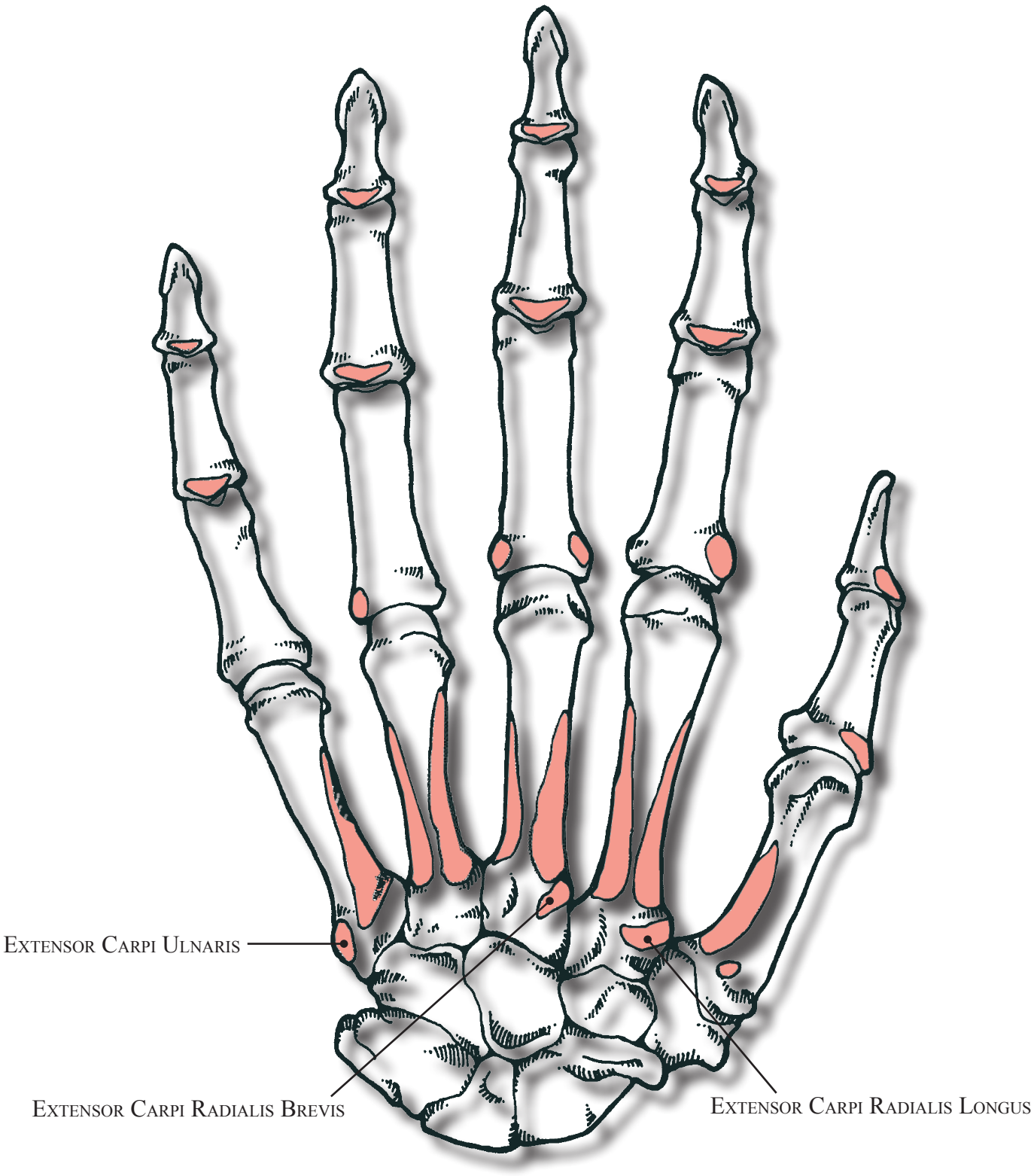
Wrist Muscles



Anterior View of Right Forearm

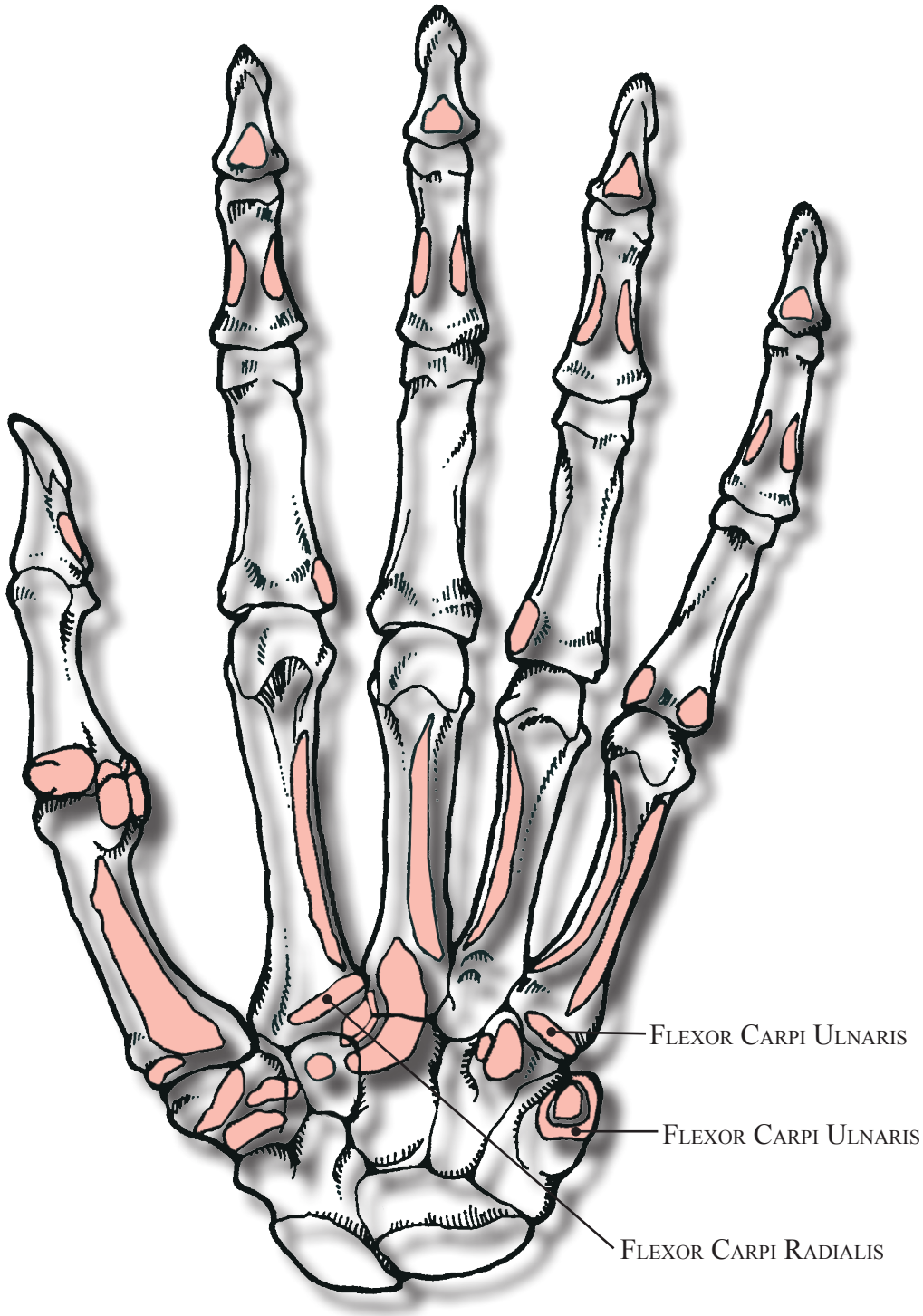
Origin and Insertion

Wrist Muscles



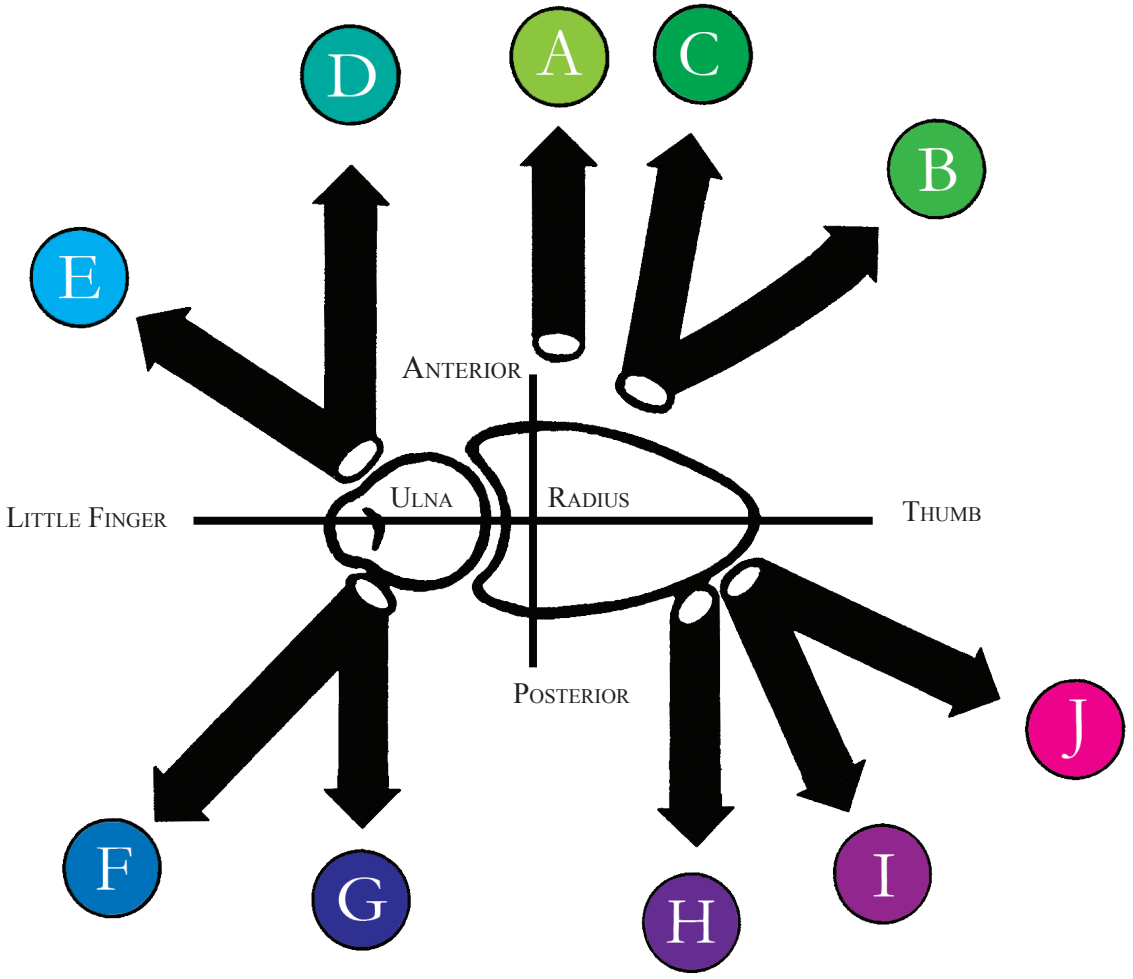
Dorsal View of Left Hand

Wrist Muscles



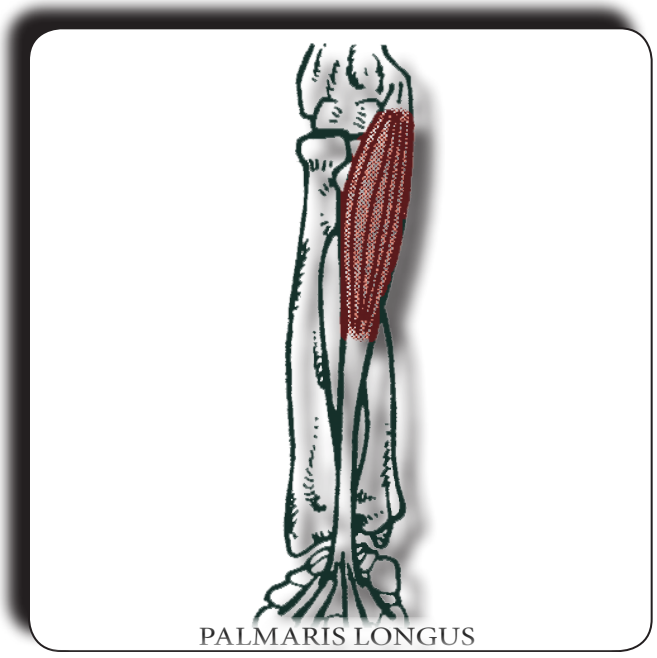
Palmar View of Left Hand

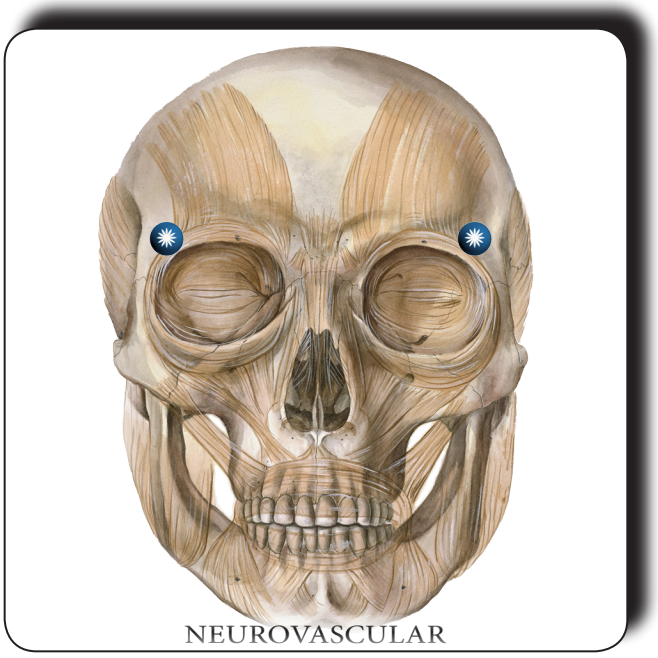
Cross Section of Wrist

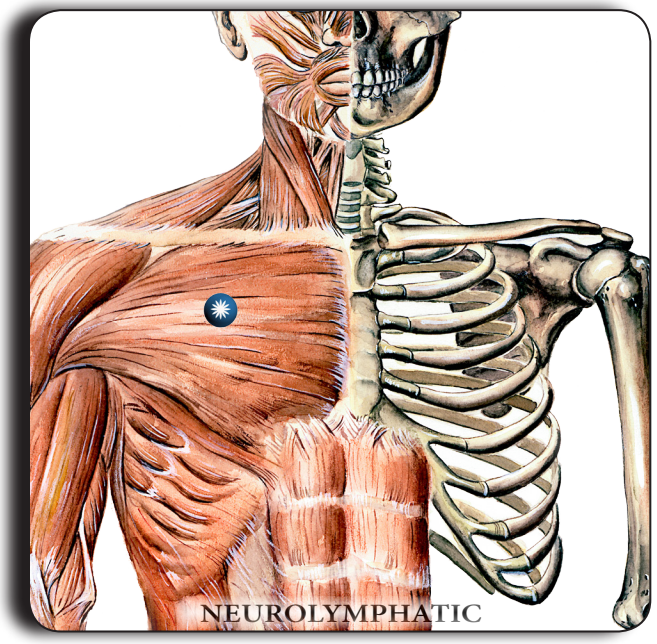


The arrows represent the directional movement of the specific muscles as identified by letters.

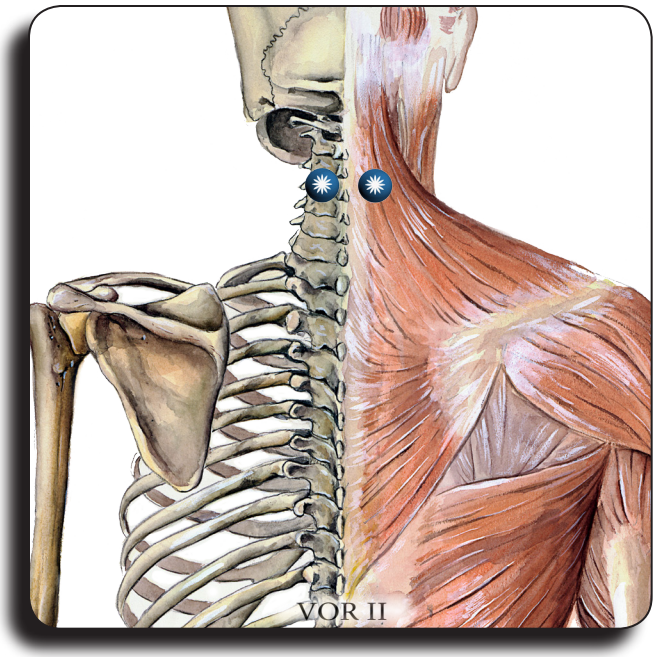
A. Palmaris Longus
B. Flexor Carpi Radialis, Abductor Division
C. Flexor Carpi Radialis, Flexor Division
D. Flexor Carpi Ulnaris, Flexor Division
E. Flexor Carpi Ulnaris, Adductor Division
F. Extensor Carpi Ulnaris, Adductor Division
G. Extensor Carpi Ulnaris, Extensor Division
H. Extensor Carpi Radialis Brevis
I. Extensor Carpi Radialis Longus, Extensor Division
J. Extensor Carpi Radialis Longus, Abductor Division

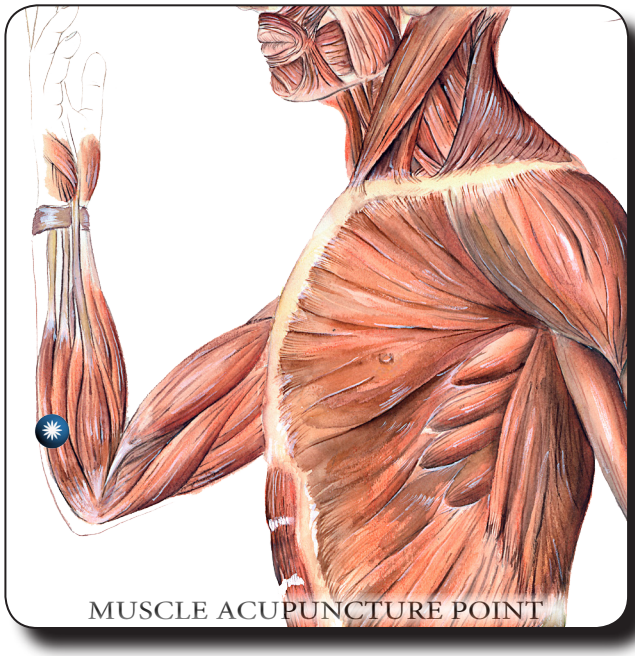

PALMARIS LONGUS


NEUROVASCULAR


NEUROLYMPHATIC

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 500: PALMARIS LONGUS

ORIGIN: Medial epicondyle of humerus.

INSERTION: Central part of transverse carpal ligament and palmar aponeurosis.

ACTION: With all fingers approximated, flexes wrist and hand on forearm.

TEST:

Patient: Supine. Flex forearm on arm. Supinate hand, approximate all fingers together and flex wrist on forearm.

Doctor: Position: Ipsilateral.
Brace: Dorsum of forearm.
Contact: All fingers to extend wrist on forearm.

NEUROVASCULAR: (Ant/BL) Frontal bone, lateral aspect.

NEUROLYMPHATIC: (Ant/R) 2nd ICS, 2" from sternum.

VISCERAL ORGAN:

I. *Kidney:* (Ant/BL) Rectus Abdominis, 2nd section, 1" superior and 2" lateral to umbilicus.

II. *Lymphatics of Throat:* (Post/BL) Neck, posterior aspect, level of C4 on bladder meridian.

M. A. P. : Si7

V.L. : T9R

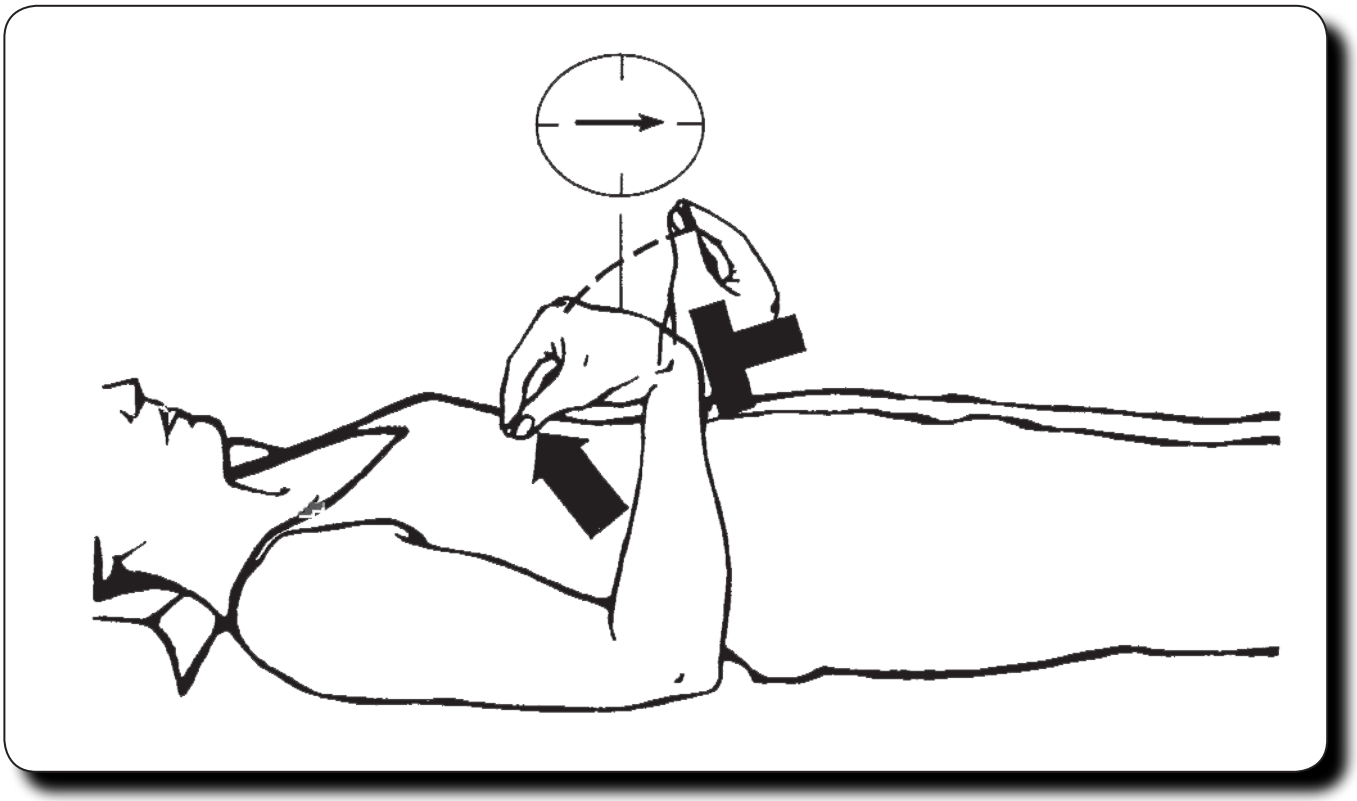
L. B. V.L. : T2R

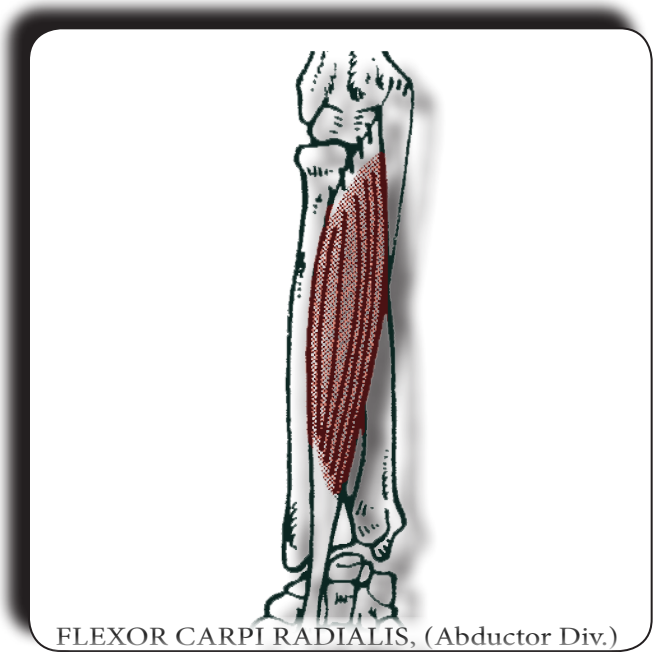
M. M. : T1

CRANIAL: Parietal

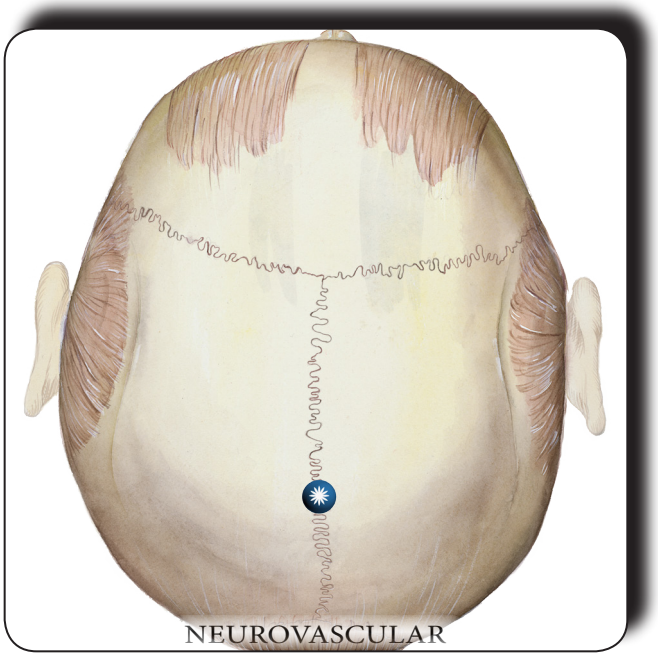
FOOT: Talus

NUTRIENT SOURCE:
2. Vitamin B (S)





FLEXOR CARPI RADIALIS, (Abductor Div.)



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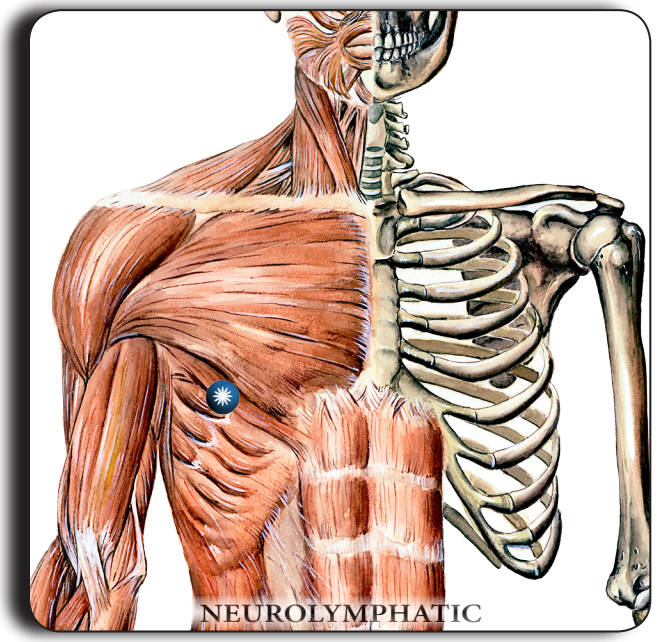

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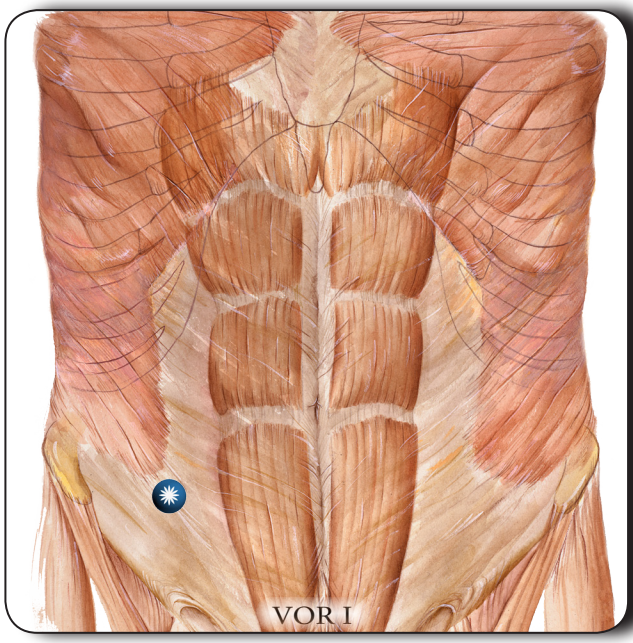
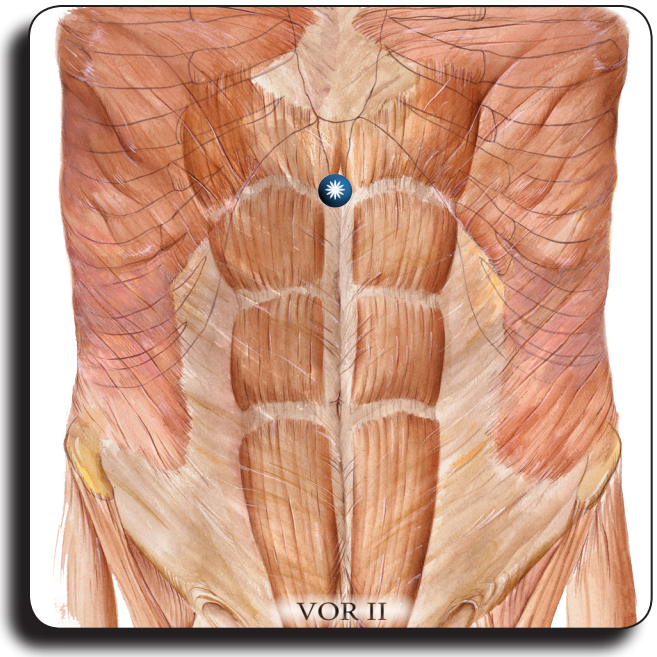
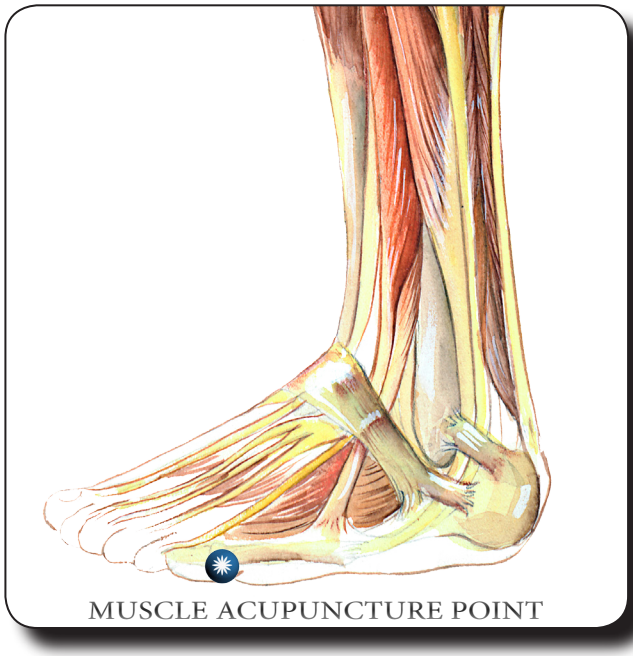


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 502: FLEXOR CARPI RADIALIS, (Abductor Division)

ORIGIN: Intermuscular septum of forearm near origin of ulnar division of Pronator Teres.

INSERTION: Base of the 2nd and 3rd metacarpal bones.

ACTION: Flexes and abducts wrist on forearm.

TEST:

Patient: Supine. Supinate and flex forearm on arm. Flex and abduct wrist on forearm.

Doctor: Position: Ipsilateral.
Brace: Dorsal medial aspect of hand.
Contact: The base of 1st metacarpal to adduct through an oblique plane.

NEUROVASCULAR: (Sup/Midline) Cranium, superior aspect, sagittal suture, halfway between fontanelles.

NEUROLYMPHATIC: (Ant/R) 5th ICS, just below nipple.

VISCERAL ORGAN:

I. *Gallbladder:* (Ant/R) Abdomen, Sp14, medial to ASIS near edge of Rectus Abdominis.

II. *Esophagus:* (Ant/Midline) Abdomen, tip of xiphoid process.

M. A. P. : B66

V.L. : L3L

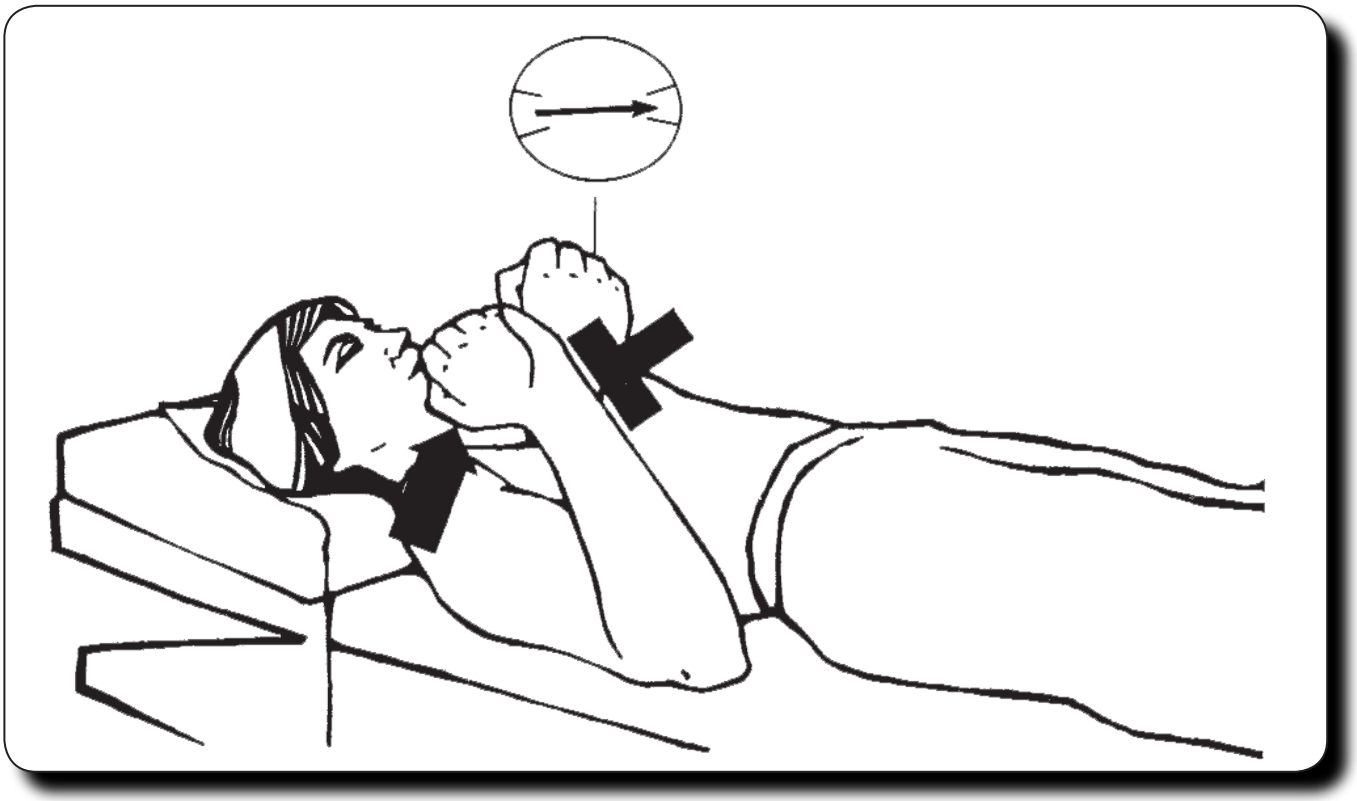
L. B. V.L. : C3L

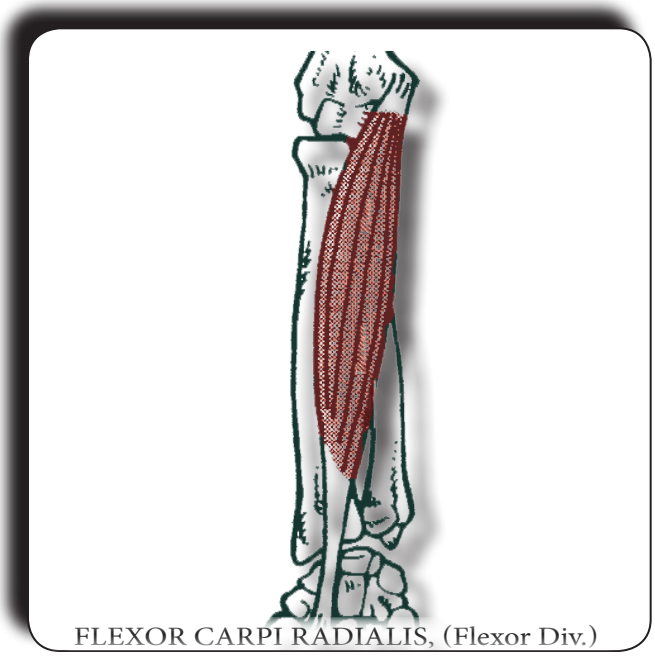
M. M. : C7

CRANIAL: Styloid

FOOT: 2nd phalanx great toe

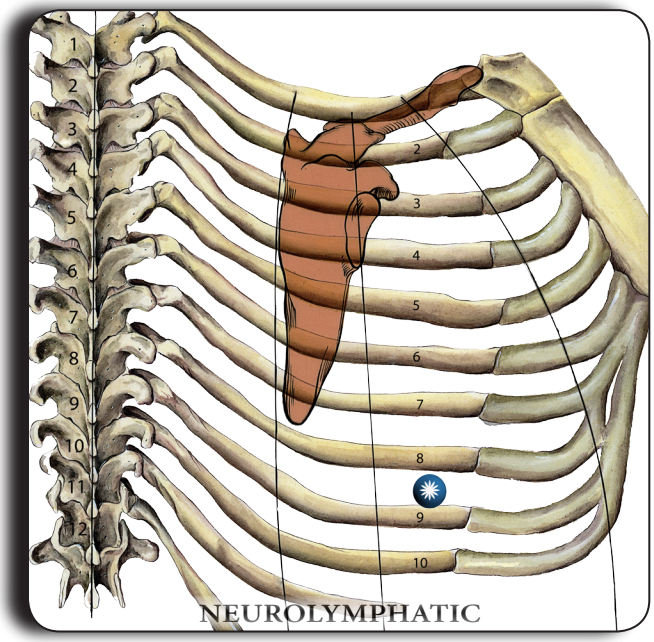
NUTRIENT SOURCE:
1. A-F Betafood (S)



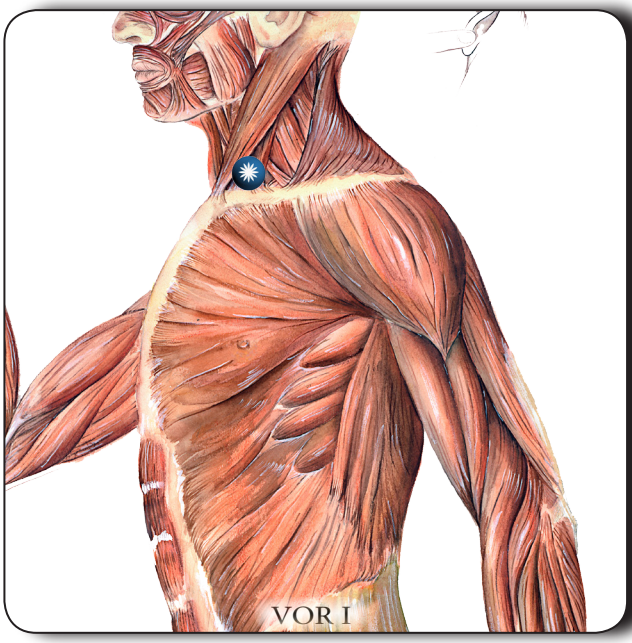


FLEXOR CARPI RADIALIS, (Flexor Div.)

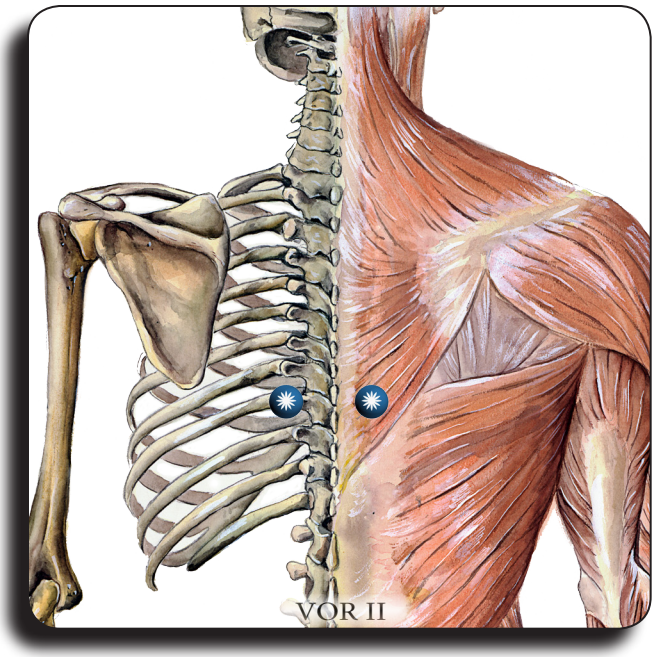
NEUROVASCULAR



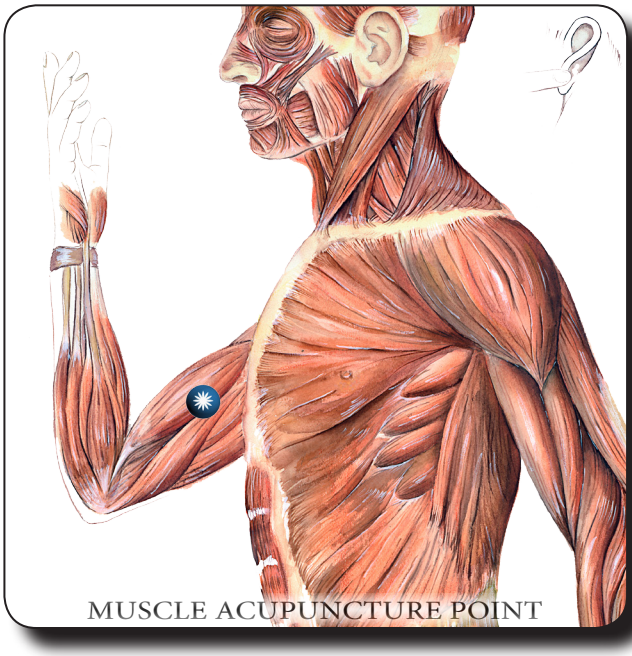
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 504: FLEXOR CARPI RADIALIS, (Flexor Division)

ORIGIN: Medial epicondyle of humerus.

INSERTION: Base of 2nd and 3rd metacarpal bones.

ACTION: Primary flexor of lateral aspect of wrist on forearm.

TEST:

Patient: Supine. Supinate and flex forearm on arm. Flex wrist, primarily 2nd metacarpal on forearm.

Doctor: Position: Ipsilateral.
Brace: Dorsum of wrist.
Contact: Lateral palmar aspect of wrist to extend through sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, lateral and superior to frontal prominence.

NEUROLYMPHATIC: (Ant/R) 8th ICS, 1" lateral to costocartilage junction.

VISCERAL ORGAN:

I. *Thyroid:* (Lat/BL) Neck, lateral aspect, just lateral to Li17, in belly of Clavicular Division of SCM.

II. *Adrenals:* (Post/BL) Ribcage, posterior aspect, 9th costovertebral junction.

M. A. P. : H1.6

V.L. : L3R

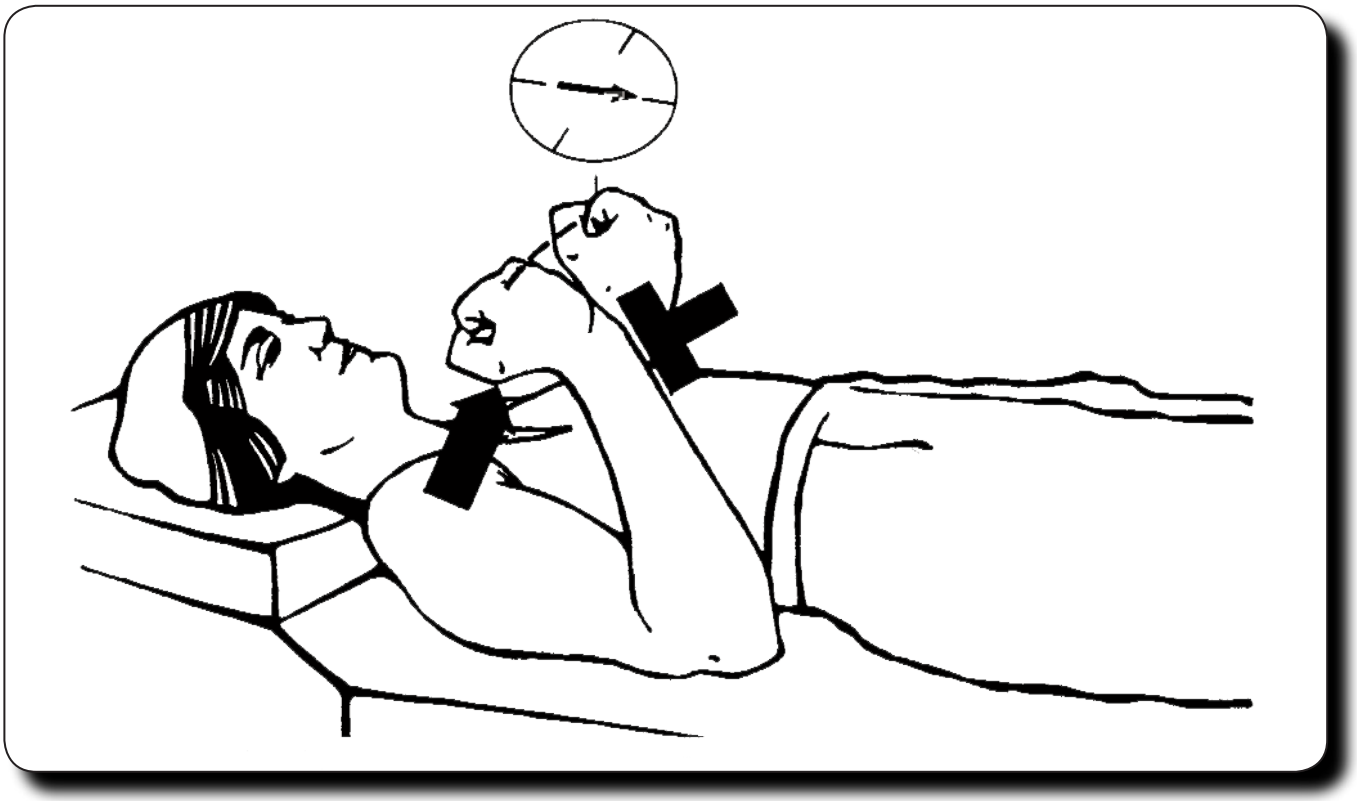
L. B. V.L. : C3R

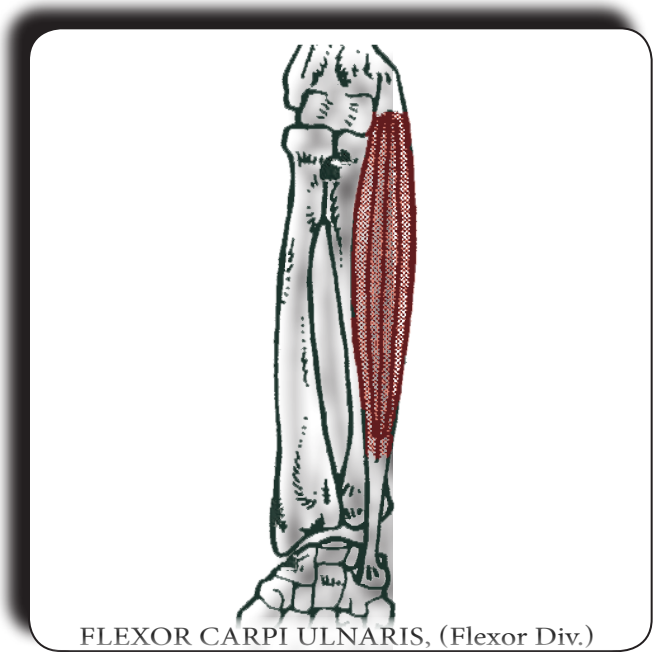
M. M. : T1

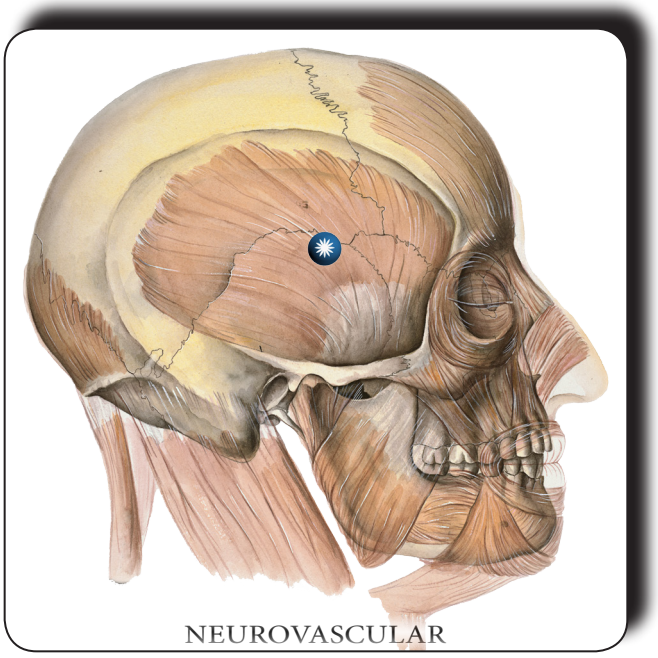
CRANIAL: In Research

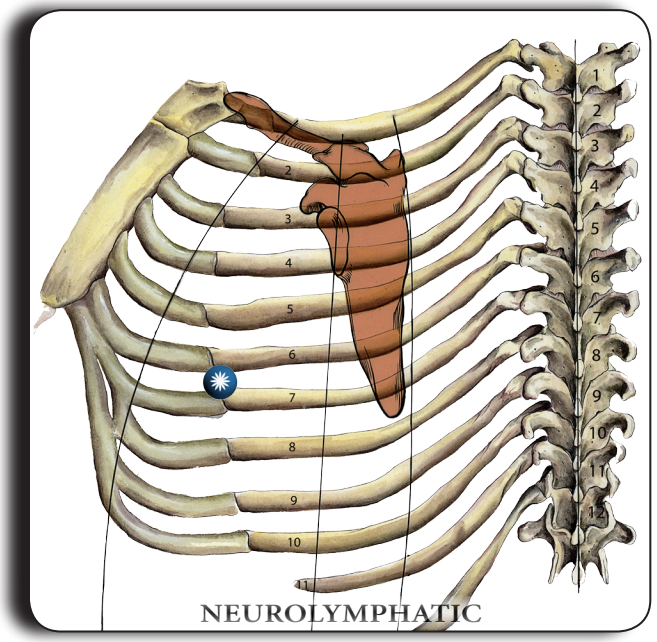
FOOT: In Research

NUTRIENT SOURCE:
1. Thytrophin (S)

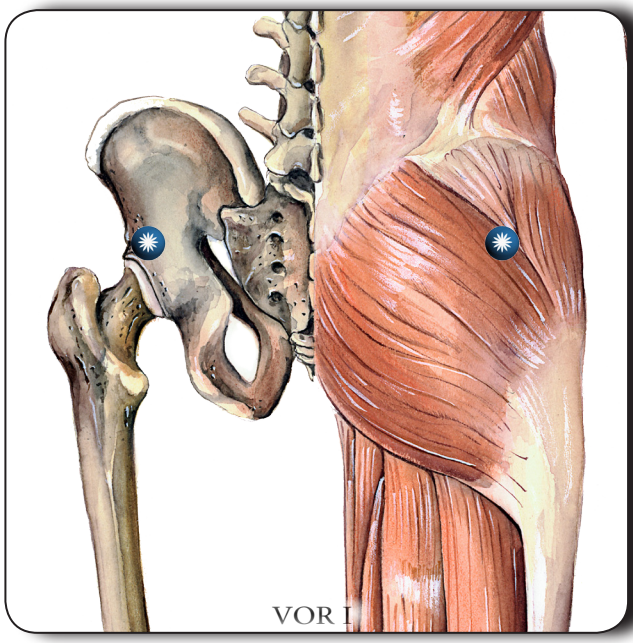


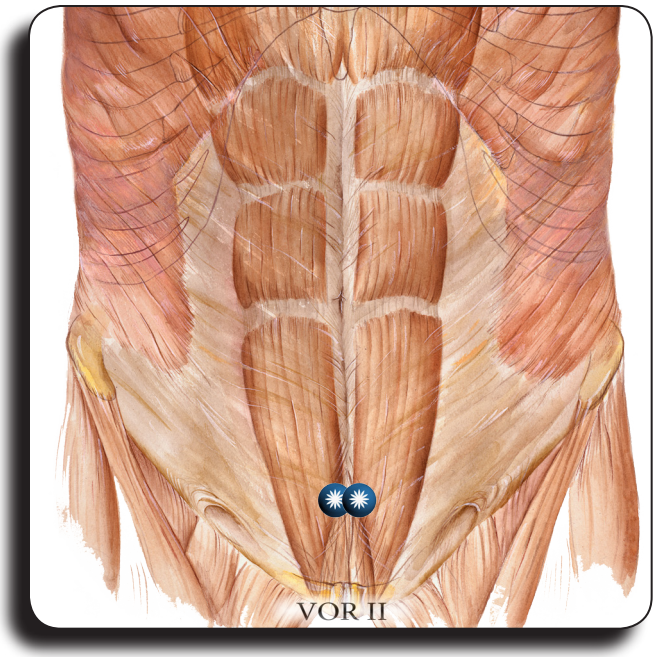

FLEXOR CARPI ULNARIS, (Flexor Div.)

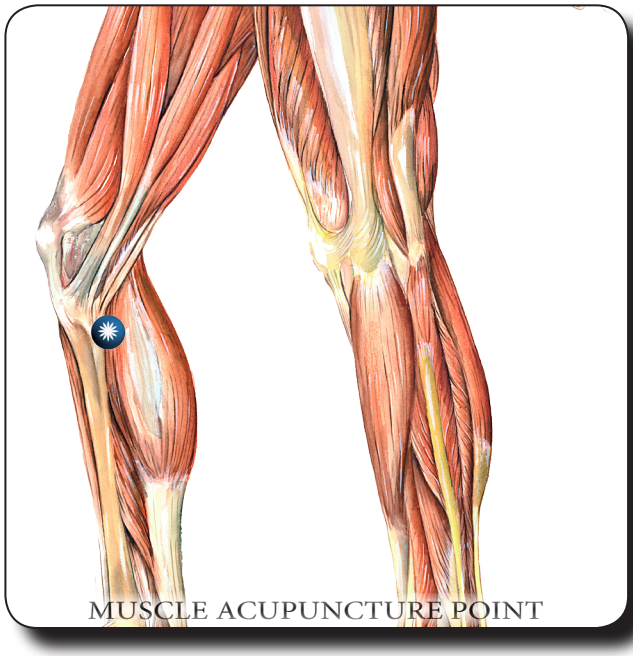

NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 506: FLEXOR CARPI ULNARIS, (Flexor Division)

ORIGIN: Medial epicondyle of humerus.

INSERTION: Pisiform bone.

ACTION: Flexes wrist (medial aspect) on forearm.

TEST:

Patient: Supine. Supinate and flex forearm on arm 90 degrees. Flex wrist on forearm pulling Pisiform toward medial epicondyle.

Doctor: Position: Ipsilateral.
Brace: Dorsum of wrist.
Contact: Palmar surface of hand near 4th and 5th metacarpals to extend wrist on forearm.

NEUROVASCULAR: (Lat) Temporal bone, squamosal portion, 3" superior to EAC and 1" anterior just inferior to squamosal suture.

NEUROLYMPHATIC: (Ant/L) 6th ICS, at costocartilage junction.

VISCERAL ORGAN:

I. *Ductus Deferens:* (Post/BL) Pelvis, posterior aspect, superior lip of acetabulum, near level of B48.

II. *Ileum:* (Ant/BL) Rectus Abdominis, 1st section, 2" superior to Pubes on medial border.

M. A. P. : Sp9

V.L. : T9R

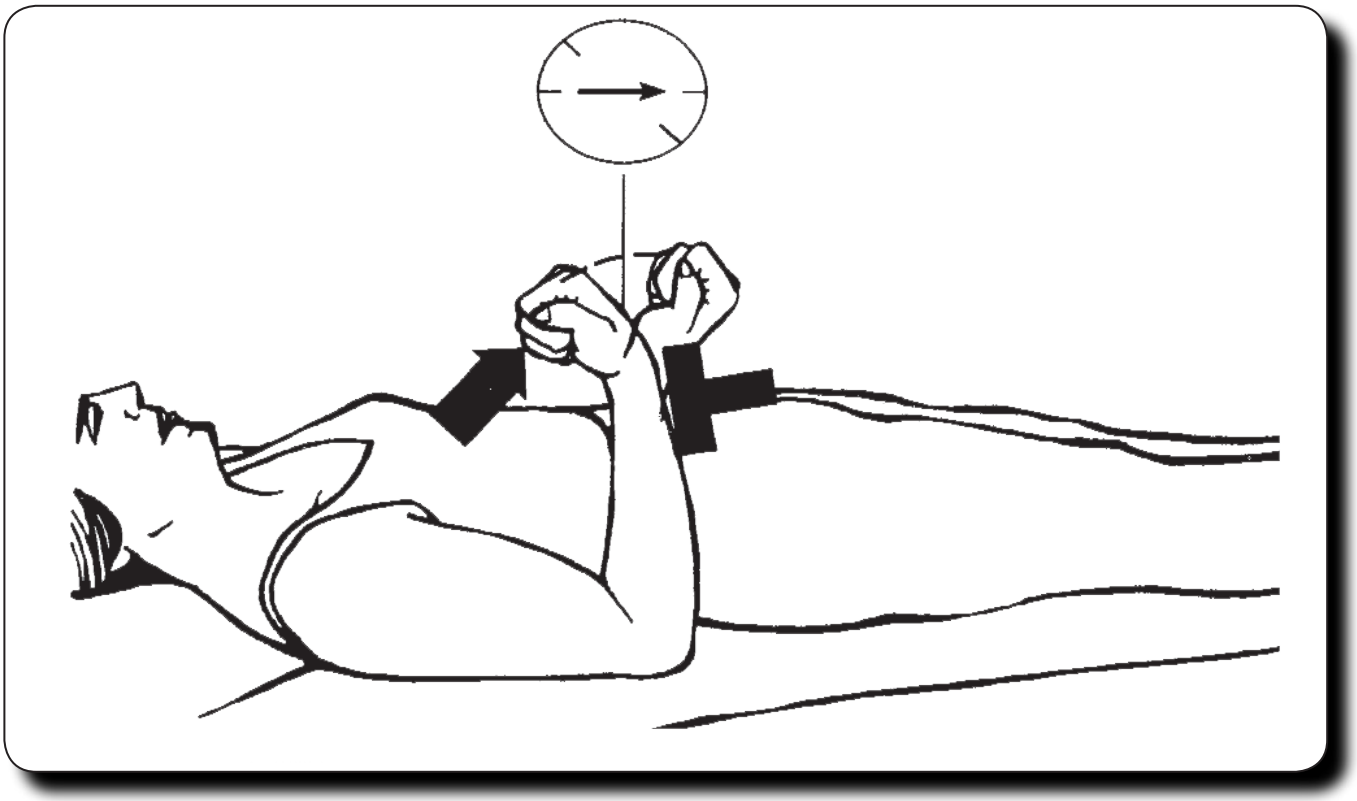
L. B. V.L. : T2R

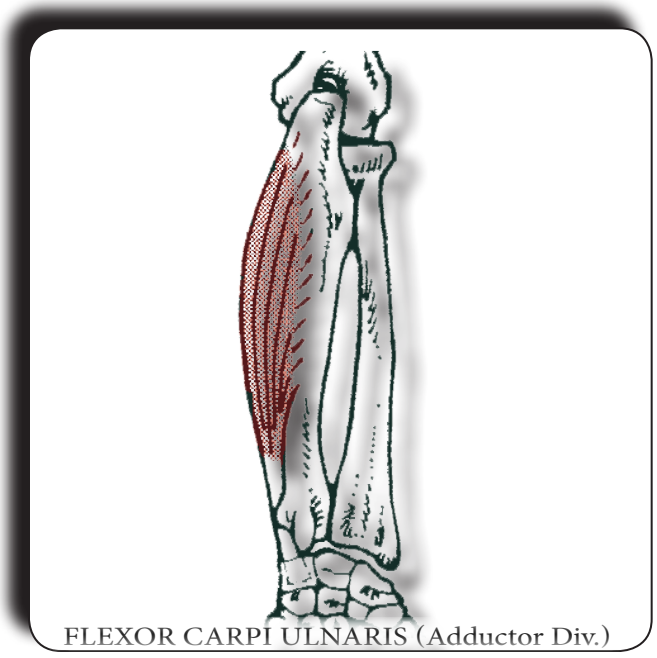
M. M. : Tl

CRANIAL: Sphenoid

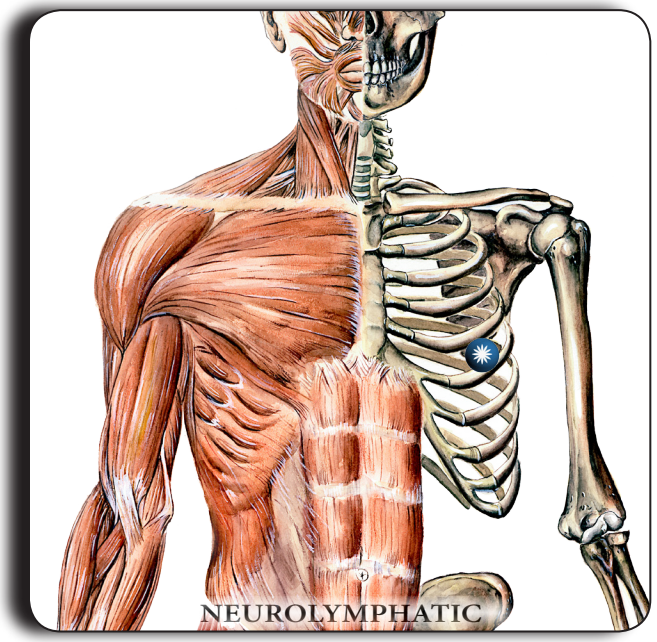
FOOT: 3rd Cuneiform

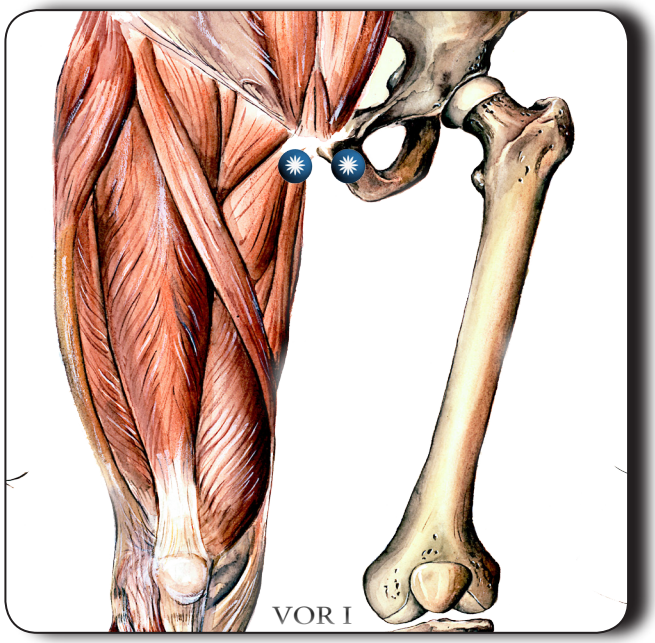
NUTRIENT SOURCE:
1. B6 with Niacinamide (S)



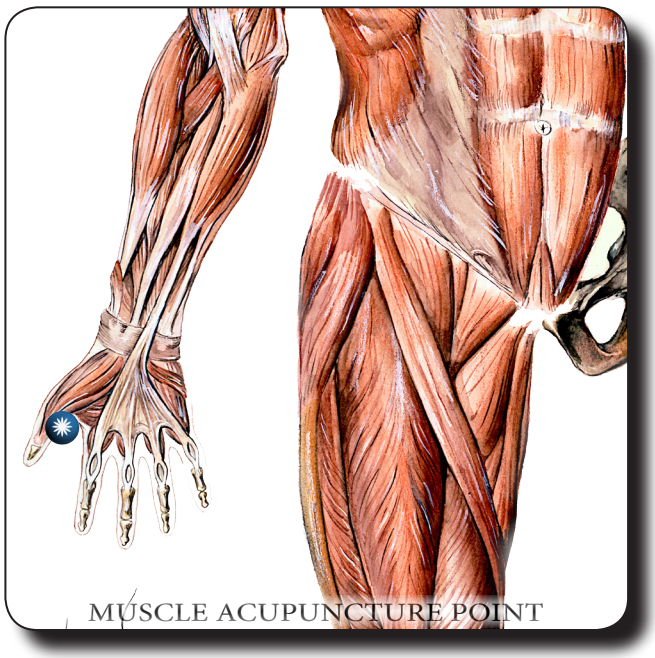

FLEXOR CARPI ULNARIS (Adductor Div.)

NEUROVASCULAR


NEUROLYMPHATIC


VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 508: FLEXOR CARPI ULNARIS, (Adductor Division)

ORIGIN: Medial margin of olecranon and upper two-thirds of dorsal border of ulna and intermuscular septa.

INSERTION: Hamate, 5th metacarpal, transverse carpal ligament.

ACTION: Flexion and primarily adduction of medial aspect of wrist on forearm.

TEST:

Patient: Supine. Supinate and flex forearm on arm 90 degrees. Adduct and slightly flex wrist on forearm.

Doctor: Position: Ipsilateral.
Brace: Lateral and dorsal aspect of ipsilateral hand.
Contact: Medial and palmer aspect to abduct through an oblique plane.

NEUROVASCULAR: (Ant/Midline) Frontal bone, anterior aspect, in glabella fossa.

NEUROLYMPHATIC: (Ant/L) 5th ICS, outside nipple.

VISCERAL ORGAN:

I. *Prostate/Uterus:* (Ant/BL) Pelvis, Pubic area, inferior ramus of pubes.

II. *Nose:* (Ant/BL) Nasal bone, lateral inferior aspect.

M. A. P. : Lu10.6

V.L. : L3L

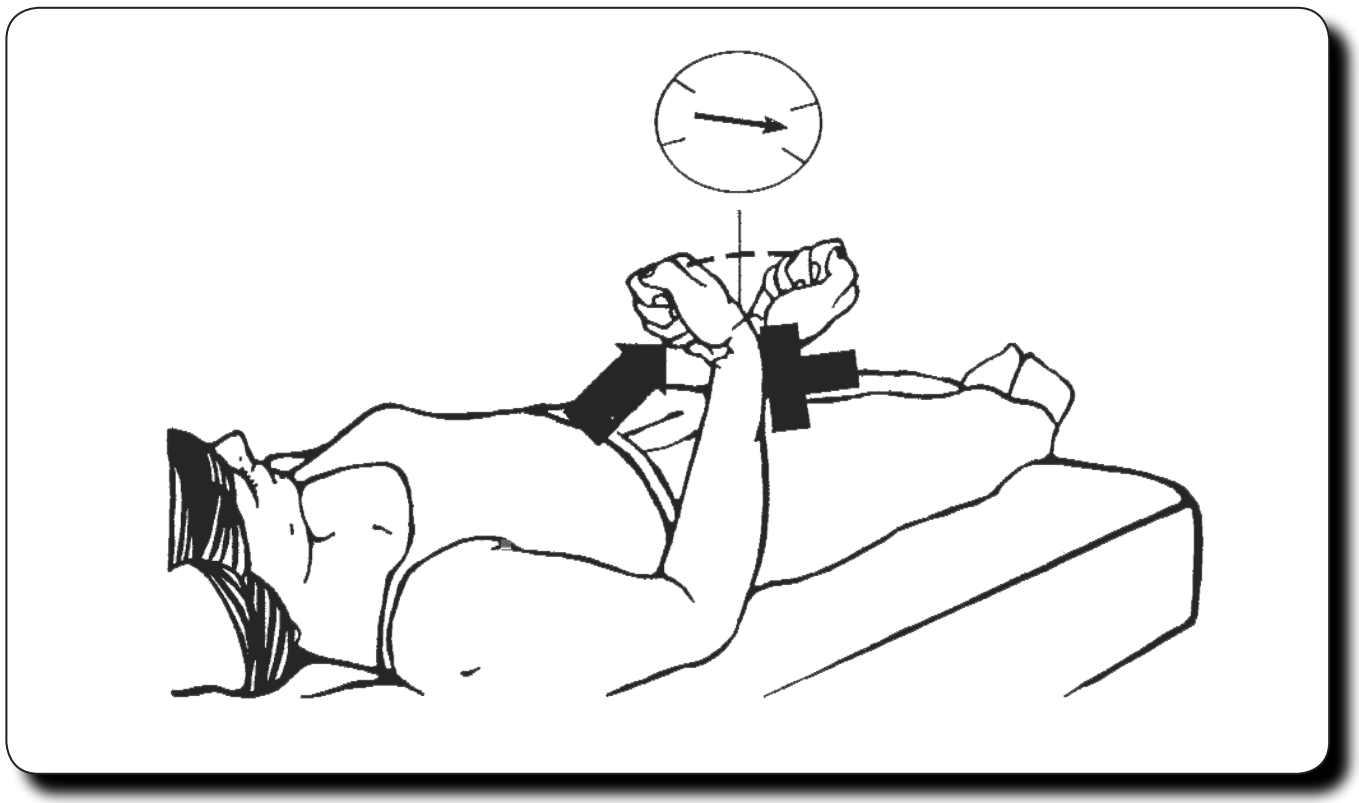
L. B. V.L. : C3L

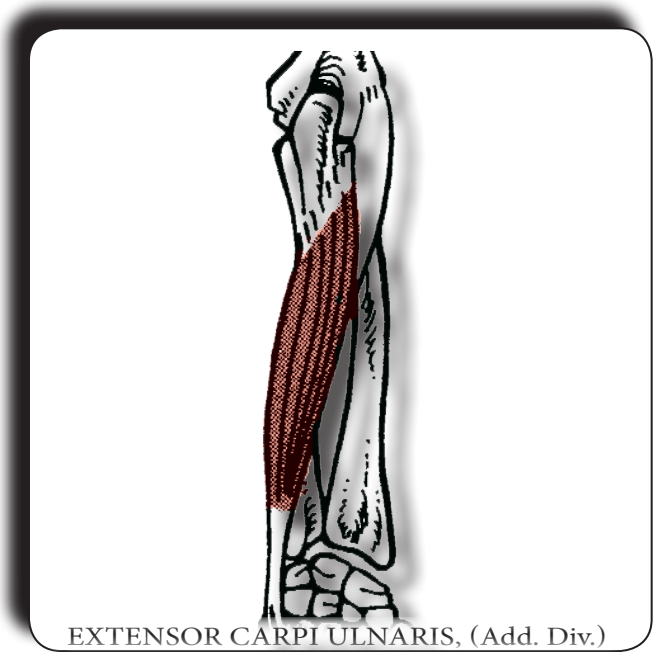
M. M. : T1

CRANIAL: Temporal

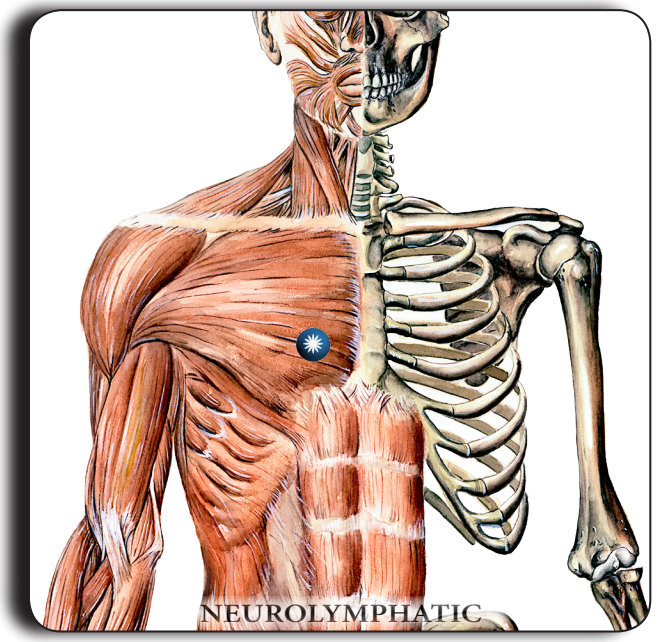
FOOT: Cuboid

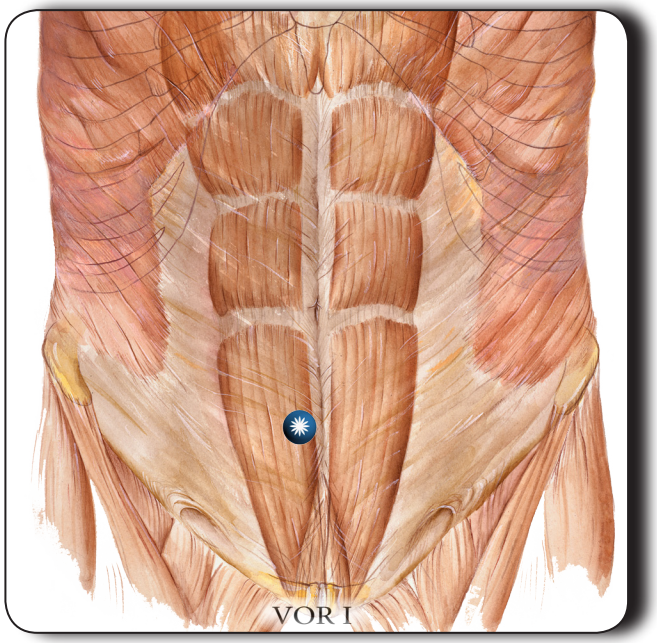
NUTRIENT SOURCE:
1. Collinsonia Root (S)

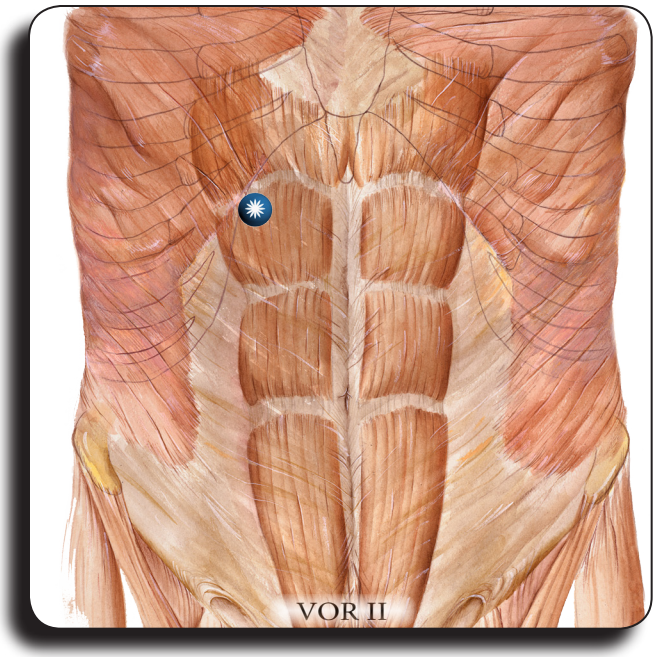


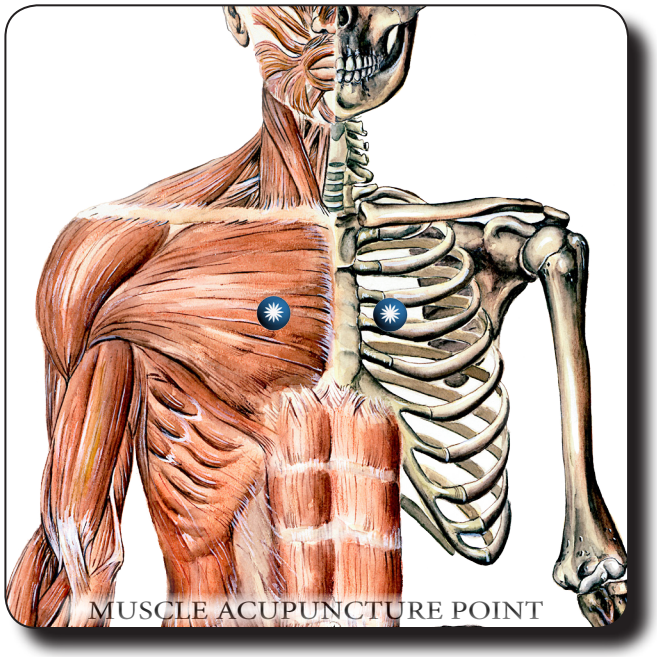

EXTENSOR CARPI ULNARIS, (Add. Div.)

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 510: EXTENSOR CARPI ULNARIS, (Adductor Division)

ORIGIN: Dorsal border of ulna and deep fascia of forearm.

INSERTION: Prominent tubercle on ulnar side of base of 5th metacarpal.

ACTION: Extends and adducts the wrist on forearm. Primary action is on the medial aspect of hand.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Pronate, extend and adduct wrist (5th metacarpal) on forearm.

Doctor: Position: Ipsilateral.
Brace: Distal medial aspect of radius.
Contact: Lateral distal aspect of 5th metacarpal to abduct wrist through oblique plane.

NOTE: Finger should be in a relaxed or neutral position during muscle test.

NEUROVASCULAR: (Ant/Midline) Mandible, posterior surface, opposite mental spine.

NEUROLYMPHATIC: (Ant/R) 4th ICS, 1-2" lateral to sternum.

VISCERAL ORGAN:

I. *Vermiform appendix:* (Ant/R) Rectus Abdominis, 1st section, middle part, below level of K15.

II. *Stomach - Pyloric Vestibule:* (Ant/R) Rectus Abdominis, 3rd section, St20.

M. A. P. : K24

V.L. : T6L

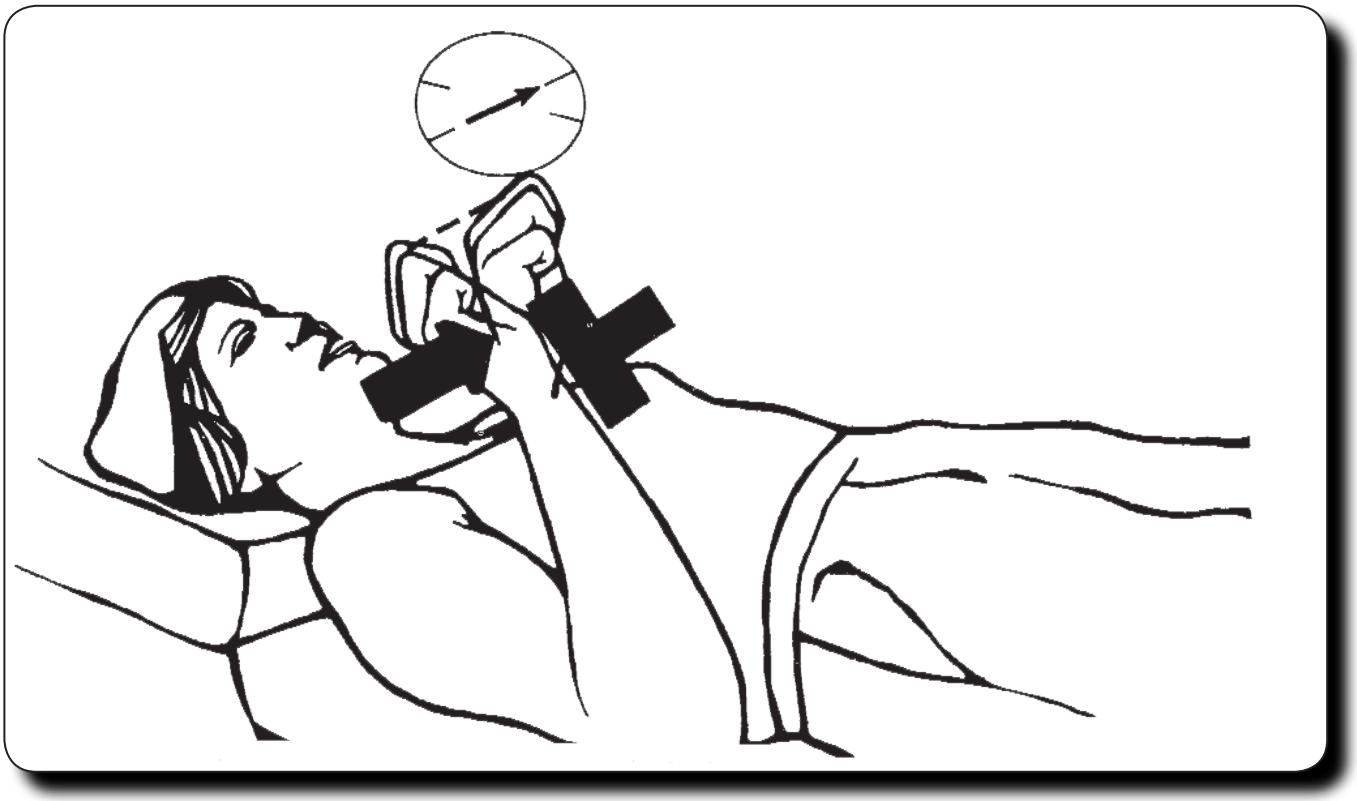
L. B. V.L. : T5L

M. M. : C6

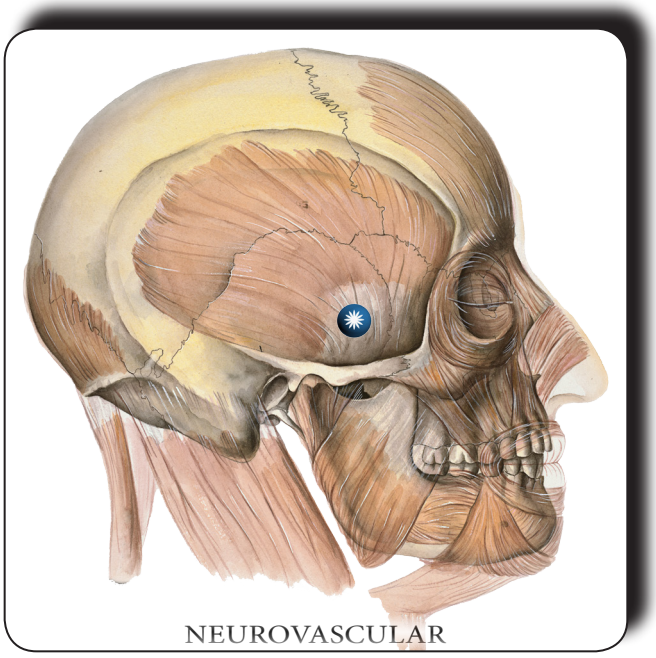
CRANIAL: Styloid

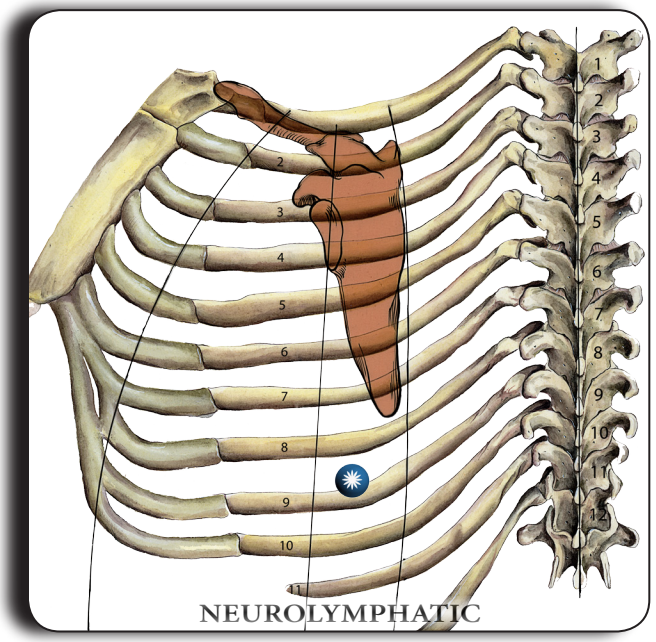
FOOT: 2nd phalanx great toe

NUTRIENT SOURCE:
1. Osteogen (S)

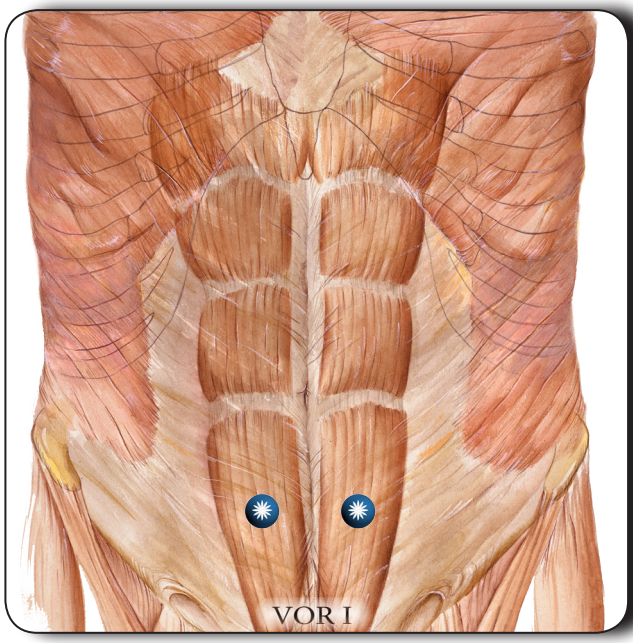


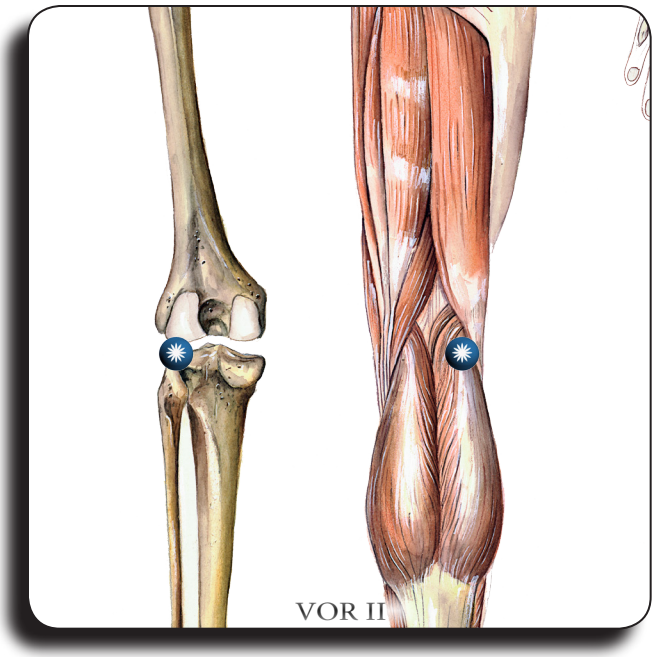
EXTENSOR CARPI ULNARIS, (Ext. Div.)


NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II

MUSCLE ACUPUNCTURE POINT

Muscle 512: EXTENSOR CARPI ULNARIS, (Extensor Division)

ORIGIN: Lateral epicondyle of humerus.

INSERTION: Prominent tubercle on ulnar side of base of 5th metacarpal.

ACTION: Extend the wrist with primary action on medial aspect of hand.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Pronate and extend wrist (5th metacarpal) on forearm.

Doctor: Position: Ipsilateral.
Brace: Palmar surface of hand near Pisiform..
Contact: Dorsal surface of hand (5th metacarpal) to flex hand through sagittal plane.

NOTE: Fingers should be in a relaxed or neutral position during muscle test.

NEUROVASCULAR: (Lat) Temporal bone, squamosal section, anterior and superior to EAC.

NEUROLYMPHATIC: (Lat/L) 8th ICS, axillary area

VISCERAL ORGAN:

I. *Kidney:* (Ant/BL) Rectus Abdominis, 1st section, between K14 and K15

II. *Prostate/Uterus:* (Post/BL) Knee, posterior lateral aspect, B53.5.

M. A. P. : G30.25

V.L. : T2L

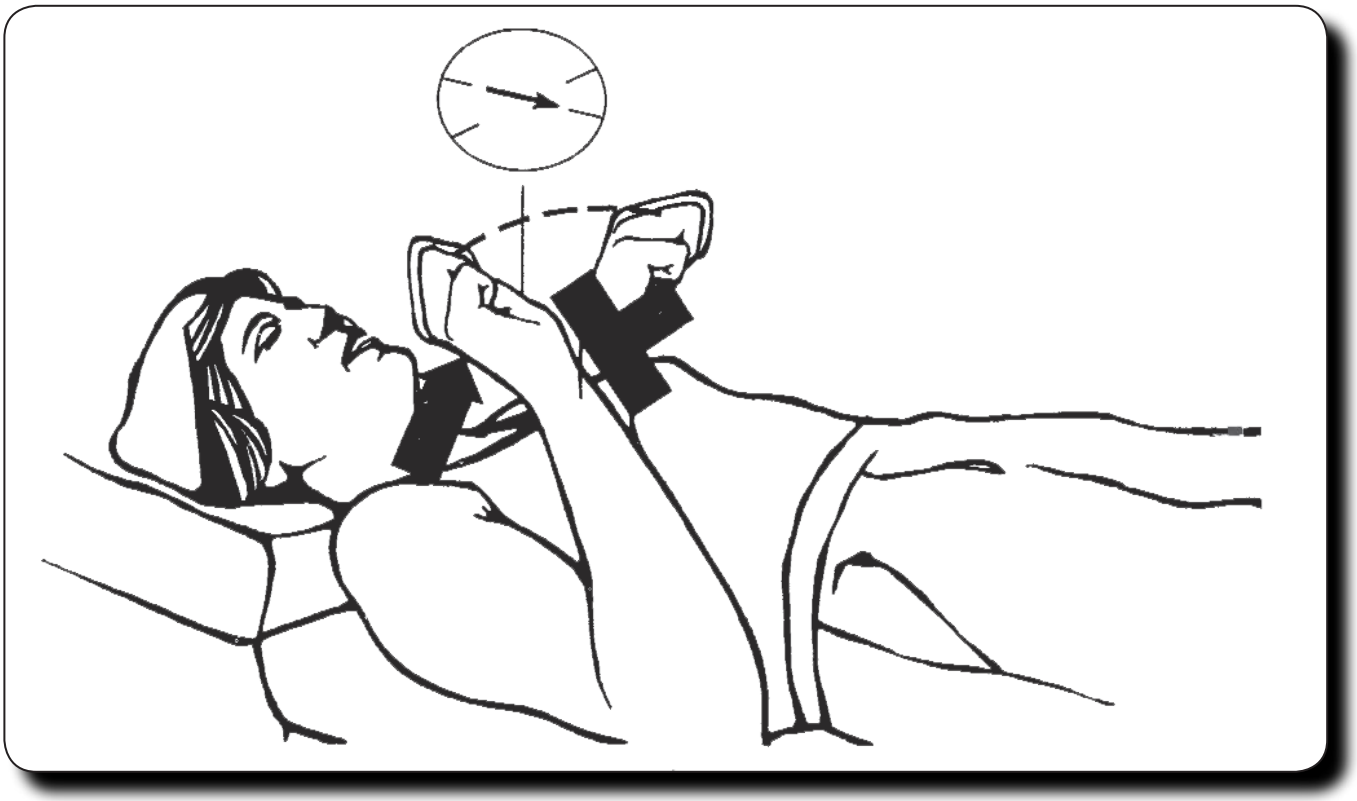
L. B. V.L. : T9L

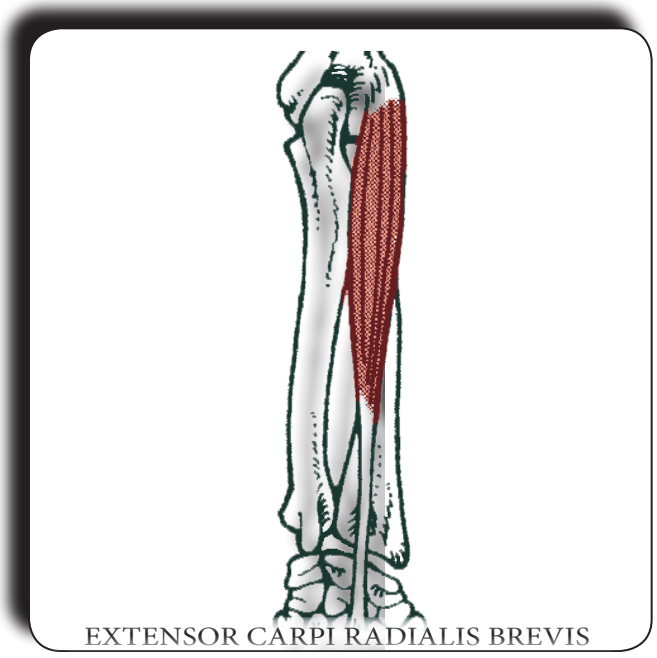
M. M. : C7

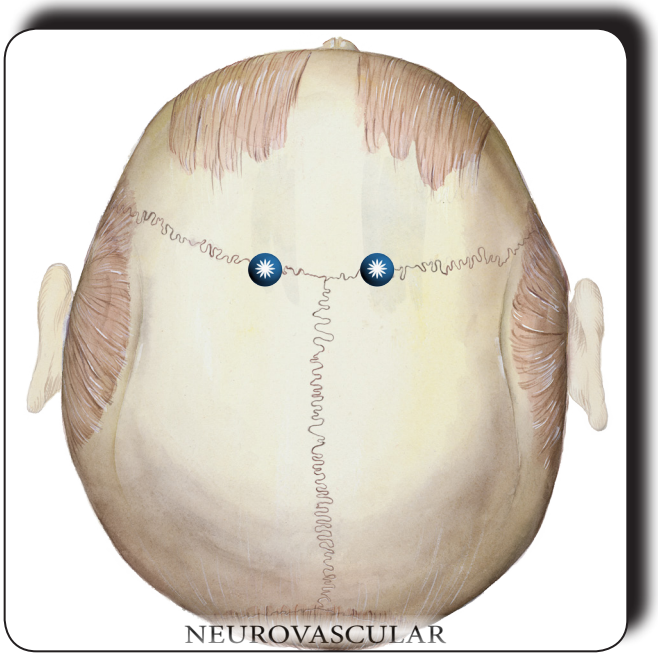
CRANIAL: Temporal

FOOT: Cuboid

NUTRIENT SOURCE:
1. Pros-X (S)




EXTENSOR CARPI RADIALIS BREVIS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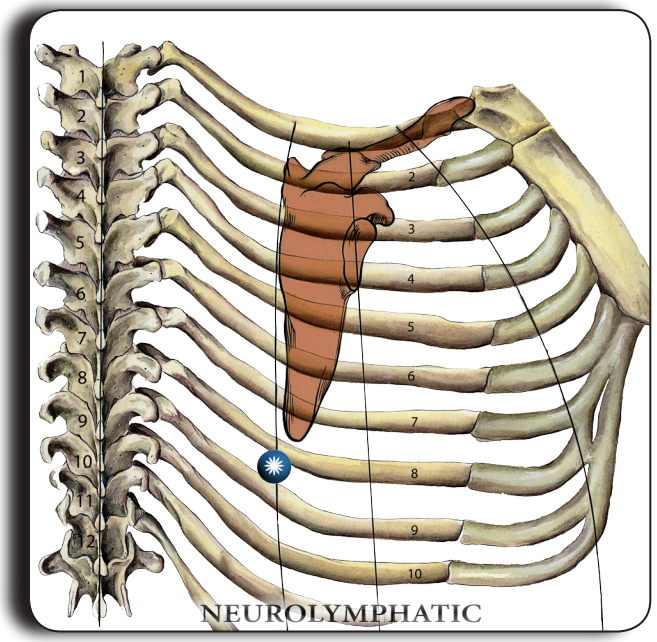

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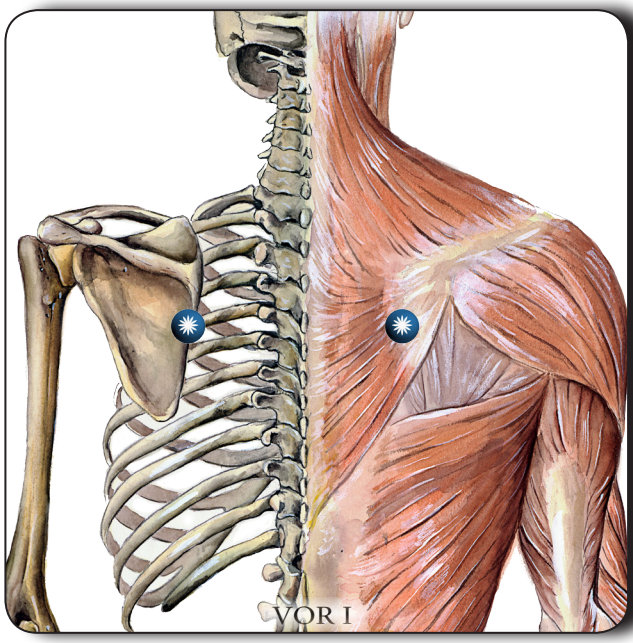
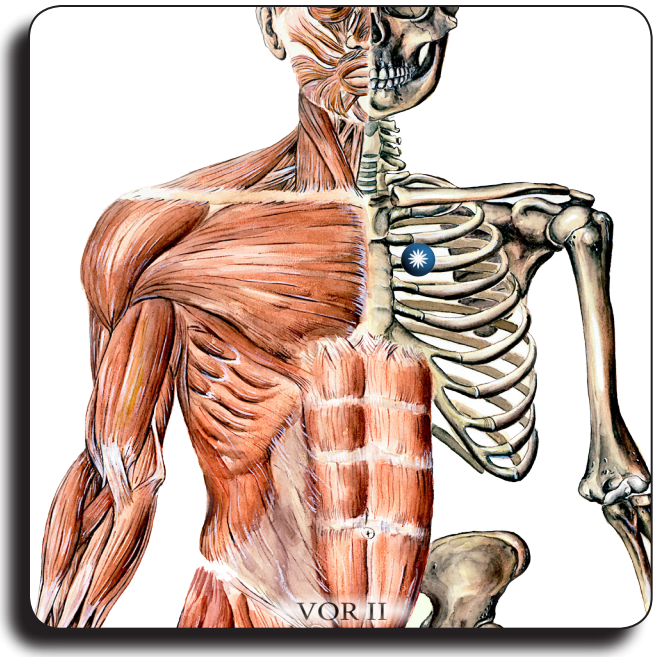
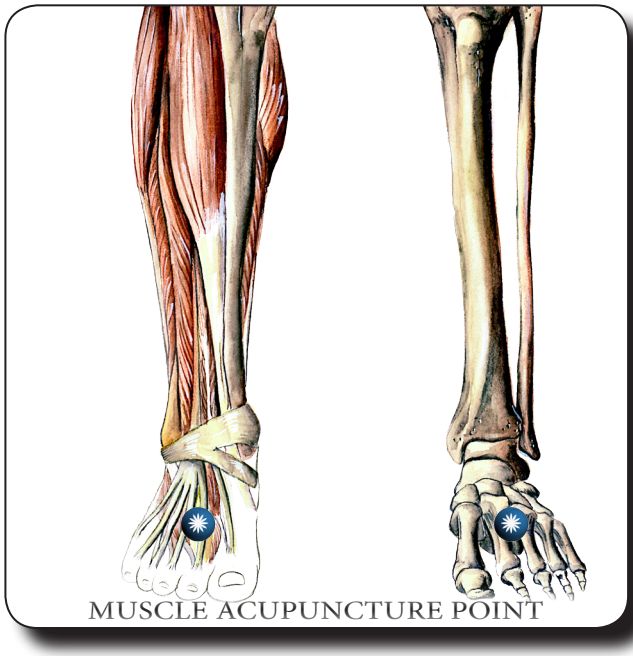

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 514: EXTENSOR CARPI RADIALIS BREVIS

ORIGIN: Lateral epicondyle of humerus, radial collateral ligament, intramuscular septum.

INSERTION: Base of 3rd metacarpal.

ACTION: Extends wrist, with primary action on 3rd metacarpal on forearm.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Pronate and extend 3rd metacarpal (wrist) on forearm.

Doctor: Position: Ipsilateral.
Brace: Palmar aspect of wrist.
Contact: Base of 3rd metacarpal to flex wrist on forearm.

NOTE: Finger should be in a relaxed or neutral position during muscle test.

NEUROVASCULAR: (Sup/BL) Cranium, superior aspect, coronal suture, 1" lateral to anterior fontanelle.

NEUROLYMPHATIC: (Post/R) 8th ICS at vertebral border of scapula.

VISCERAL ORGAN:

I. *Duodenum - horizontal section:* (Post/BL) Scapula, vertebral border at level of 5th rib.

II. *Nose:* (Ant/L) Ribcage, 3rd costocartilage junction.

M. A. P. : St43

V.L. : T1R

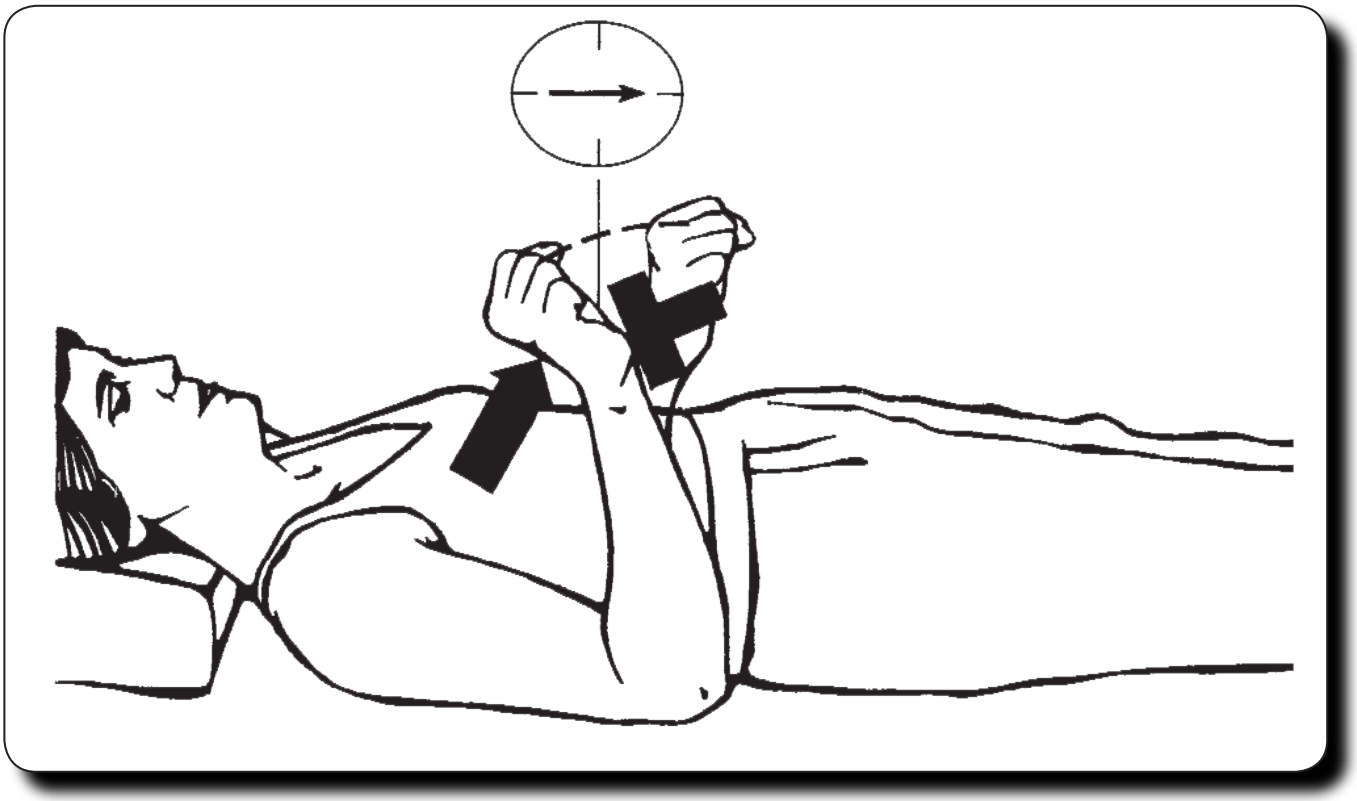
L. B. V.L. : T10LR

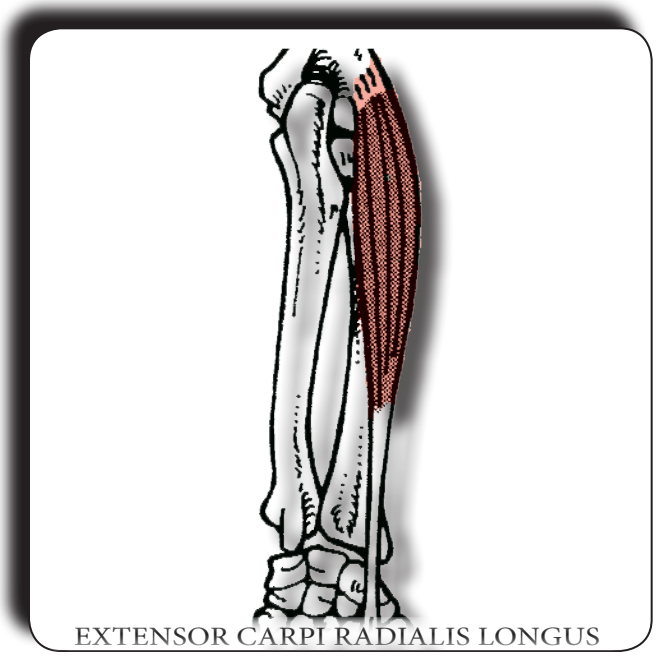
M. M. : C7

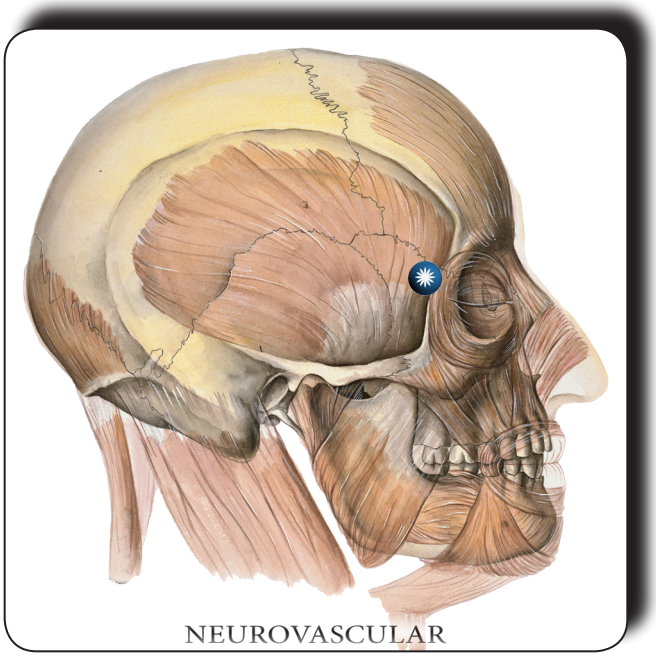
CRANIAL: Sphenoid

FOOT: 3rd Metatarsal

NUTRIENT SOURCE:
1. Organic Iodine (S)




EXTENSOR CARPI RADIALIS LONGUS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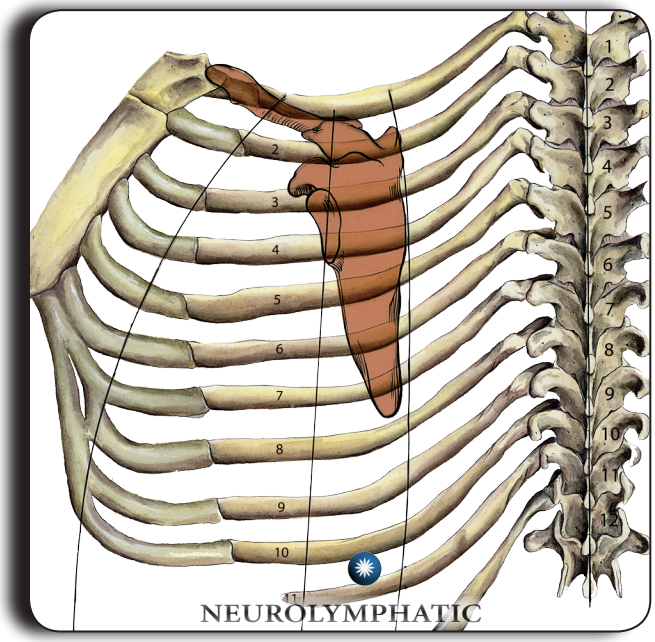
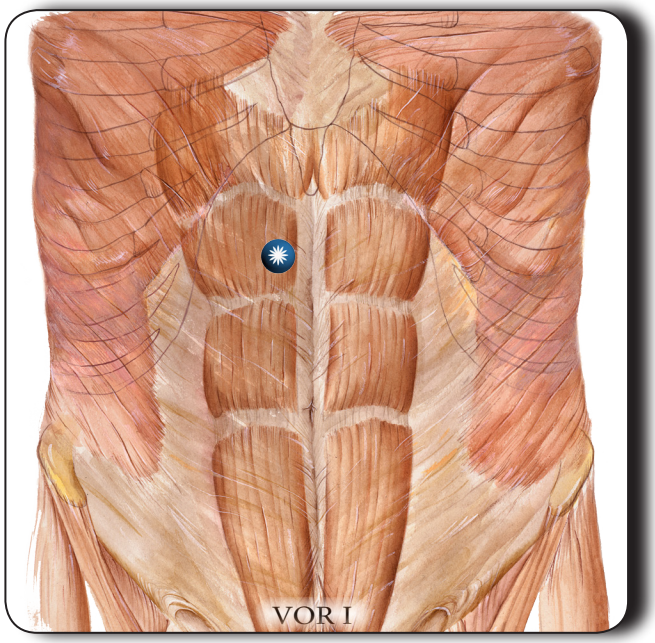
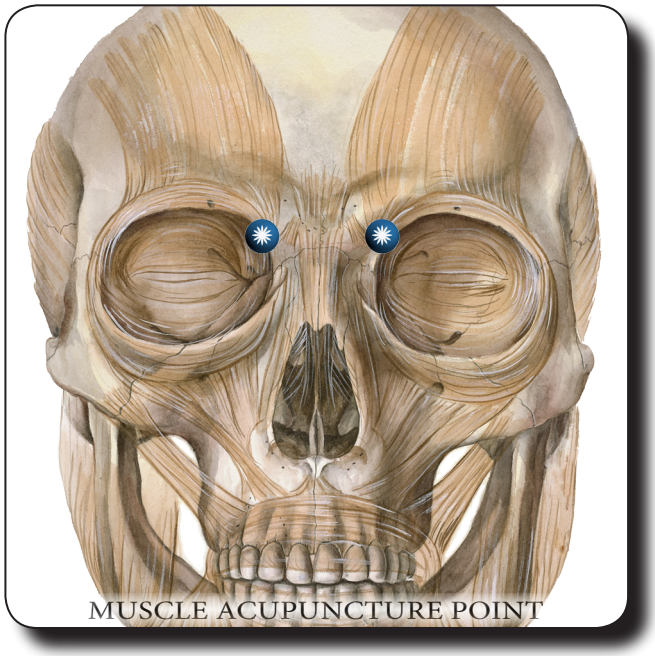


NEUROLYMPHATIC


VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 516: EXTENSOR CARPI RADIALIS LONGUS (Extensor Division)

ORIGIN: Lower fibers of lateral supracondylar ridge of humerus and the common tendon of wrist extensors.

INSERTION: Dorsal surface of base of 2nd metacarpal on its lateral side .

ACTION: Extends the wrist (2nd metacarpal) on the forearm.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Pronate and extend lateral aspect of wrist on forearm.

Doctor: Position: Ipsilateral.
Brace: Palmar surface of wrist.
Contact: 2nd metacarpal to flex wrist through sagittal plane.

NOTE: Fingers should be in a relaxed or neutral position during muscle test.

NEUROVASCULAR: (Lat) Sphenoid bone, greater wing just superior to eye.

NEUROLYMPHATIC: (Lat/L) 10th ICS, mid-axillary area.

VISCERAL ORGAN:

I. *Stomach - Pyloric antrum:* (Ant/R) Rectus Abdominis, 3rd section, 1" lateral to linea alba, K19.

II. *Kidney:* (Ant/BL) Rectus Abdominis, 3rd section near origin.

M. A. P. : B1.5

V.L. : C5L

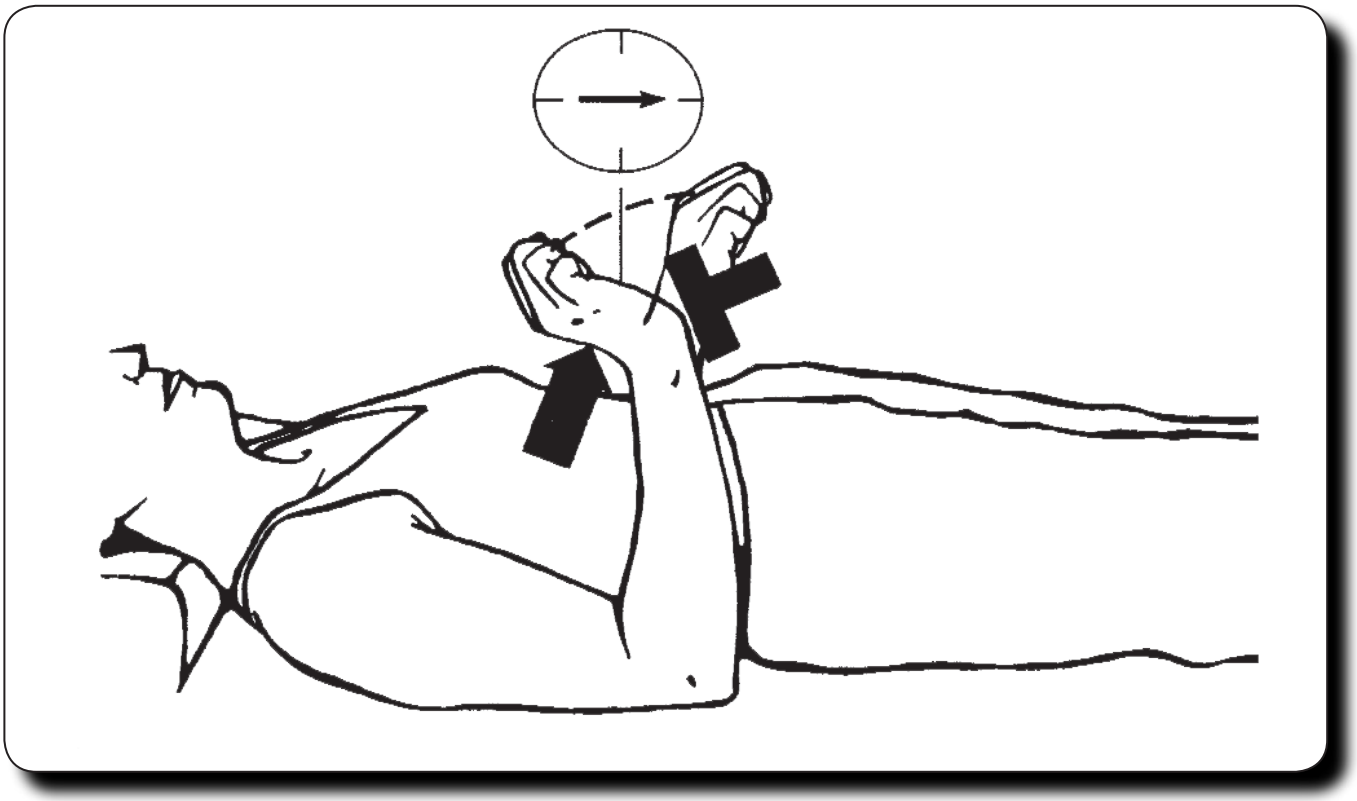
L. B. V.L. : L1L

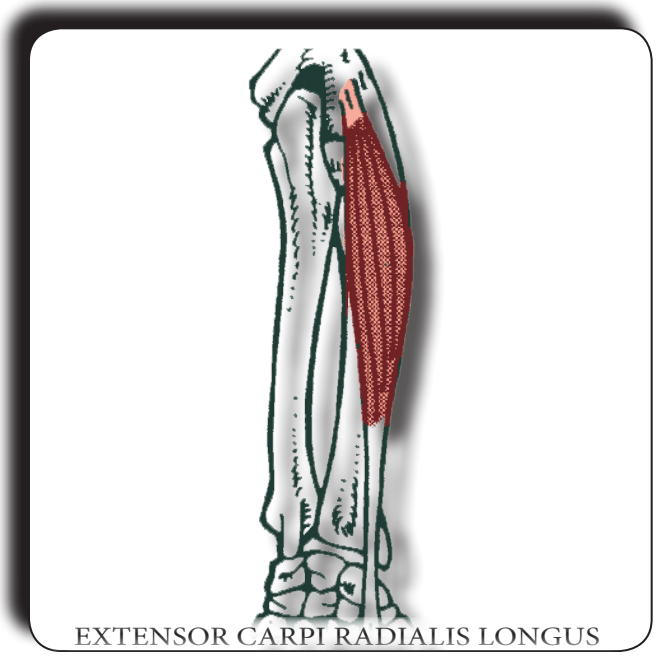
M. M. : C7

CRANIAL: Temporal

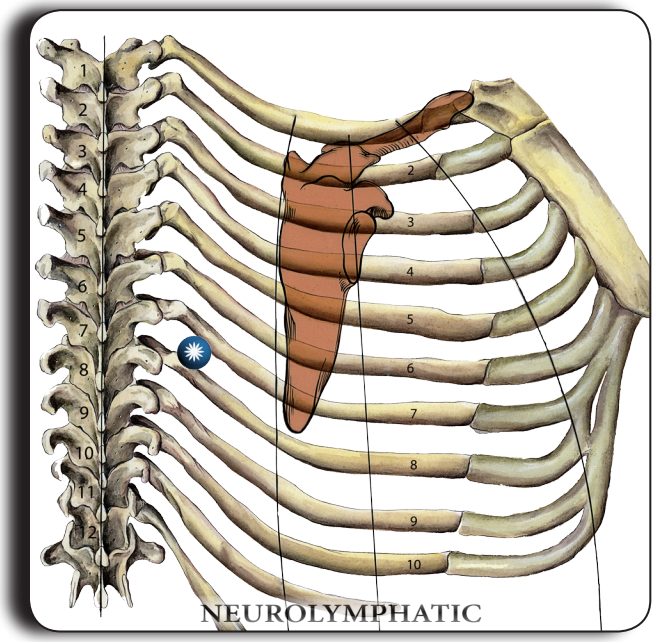
FOOT: Cuboid

NUTRIENT SOURCE:
1. Niacinamide B6 (S)




EXTENSOR CARPI RADIALIS LONGUS

NEUROVASCULAR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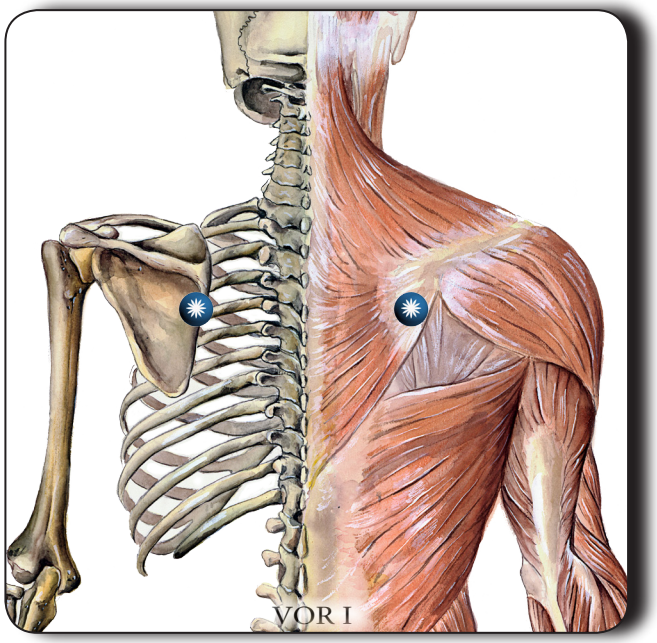
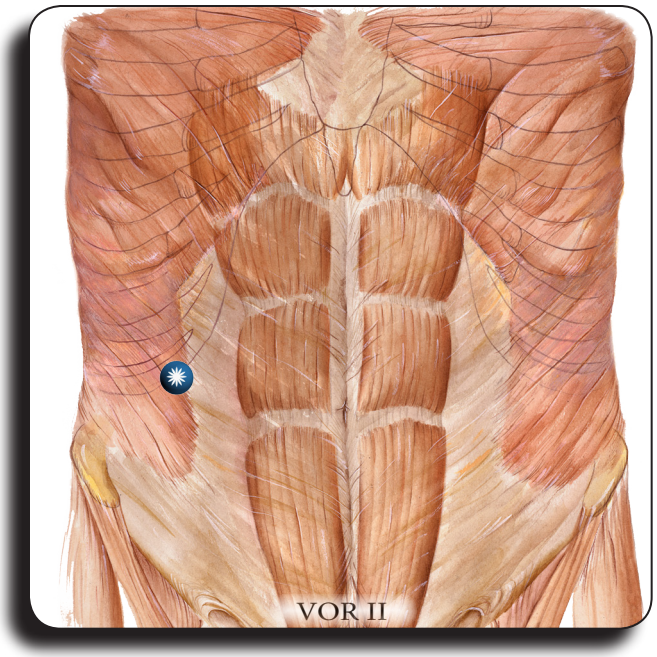
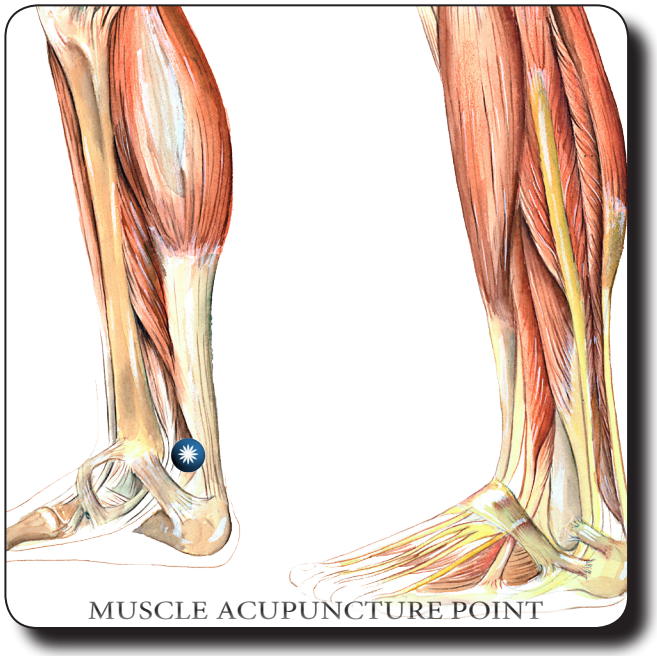

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 518: EXTENSOR CARPI RADIALIS LONGUS (Abductor Division)

ORIGIN: Intermuscular septum, superior fibers of lateral supracondylar ridge of humerus.

INSERTION: Dorsal surface of base of 2nd metacarpal on its lateral side.

ACTION: Extends and abducts (lateral aspect) wrist on forearm.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Slightly extend, pronate and abduct wrist on forearm.

Doctor: Position: Ipsilateral.
Brace: Palmar medial aspect of wrist.
Contact: Lateral aspect of wrist to adduct through oblique plane.

NOTE: Thumb should be adducted as well as other fingers into neutral position during contractive phase of muscle test.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, 1" inferior to hairline, 1/2" lateral to midline.

NEUROLYMPHATIC: (Post/R) 7th ICS, 1-2" lateral to spine .

VISCERAL ORGAN:

I. *Pancreatic duct system:* (Post/BL) Scapula, Infraspinatus fossa, vertebral border below spine.

II. *Liver:* (Ant/R) Abdomen, inferior and medial to tip of 10th rib.

M. A. P. : K6

V.L. : T11R

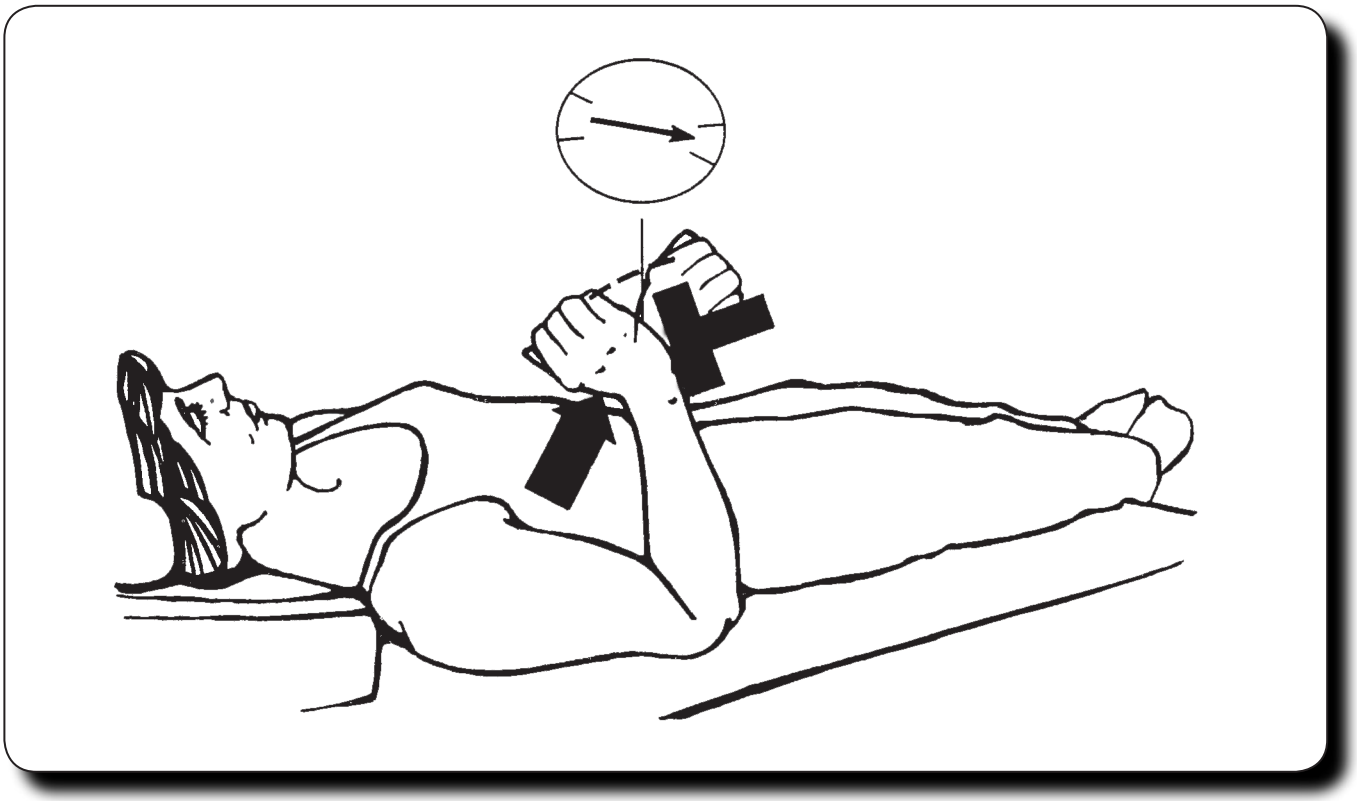
L. B. V.L. : C7R

M. M. : C6

CRANIAL: Temporal

FOOT: Cuboid

NUTRIENT SOURCE:
1. Ferrofood (S)



Section IV:

Hand

Muscles Of Thumb

Muscles Of The Hand That Insert On The Thumb

Origin: Forearm
(Extensors)
1. 520 Extensor Pollicis Longus, Ulnar Division
2. 522 Extensor Pollicis Longus, Septal Division
3. 524 Extensor Pollicis Brevis, Radial Division
4. 526 Extensor Pollicis Brevis, Septal Division

(Flexors)
5. 528 Flexor Pollicis Longus

(Abductors)
6. 530 Abductor Pollicis Longus, Ulnar Division
7. 532 Abductor Pollicis Longus, Radial Division

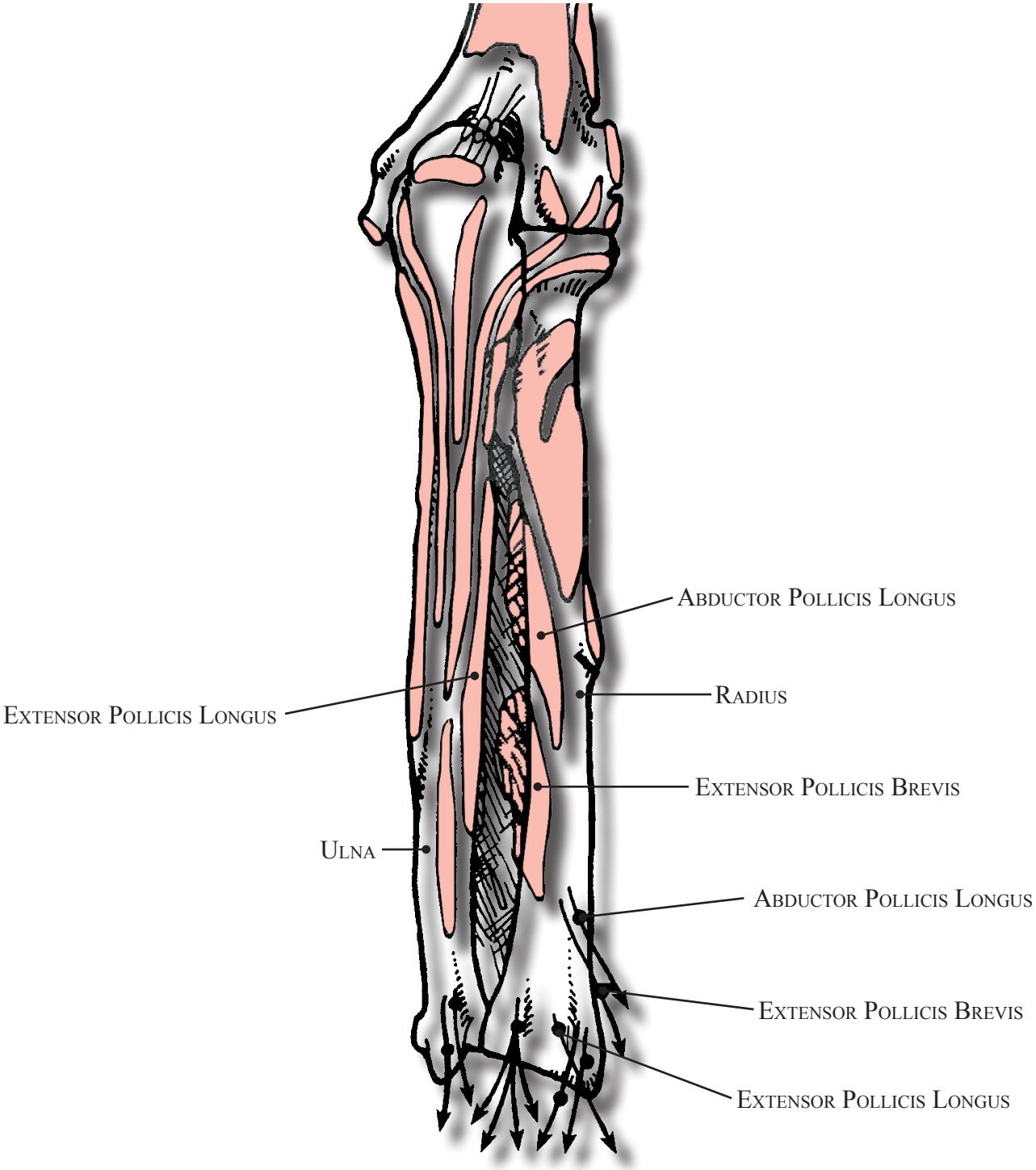
Origin: Hand
(Flexors)
1. 534 Flexor Pollicis Brevis
2. 536 Interossei Pollicis (Palmaris, First)
3. 538 Opponens Pollicis, Flexor Division

(Abductors)
4. 540 Opponens Pollicis, Abductor Division
5. 542 Abductor Pollicis Brevis

(Adductors)
6. 544 Adductor Pollicis Transversus
7. 546 Adductor Pollicis Obliquus

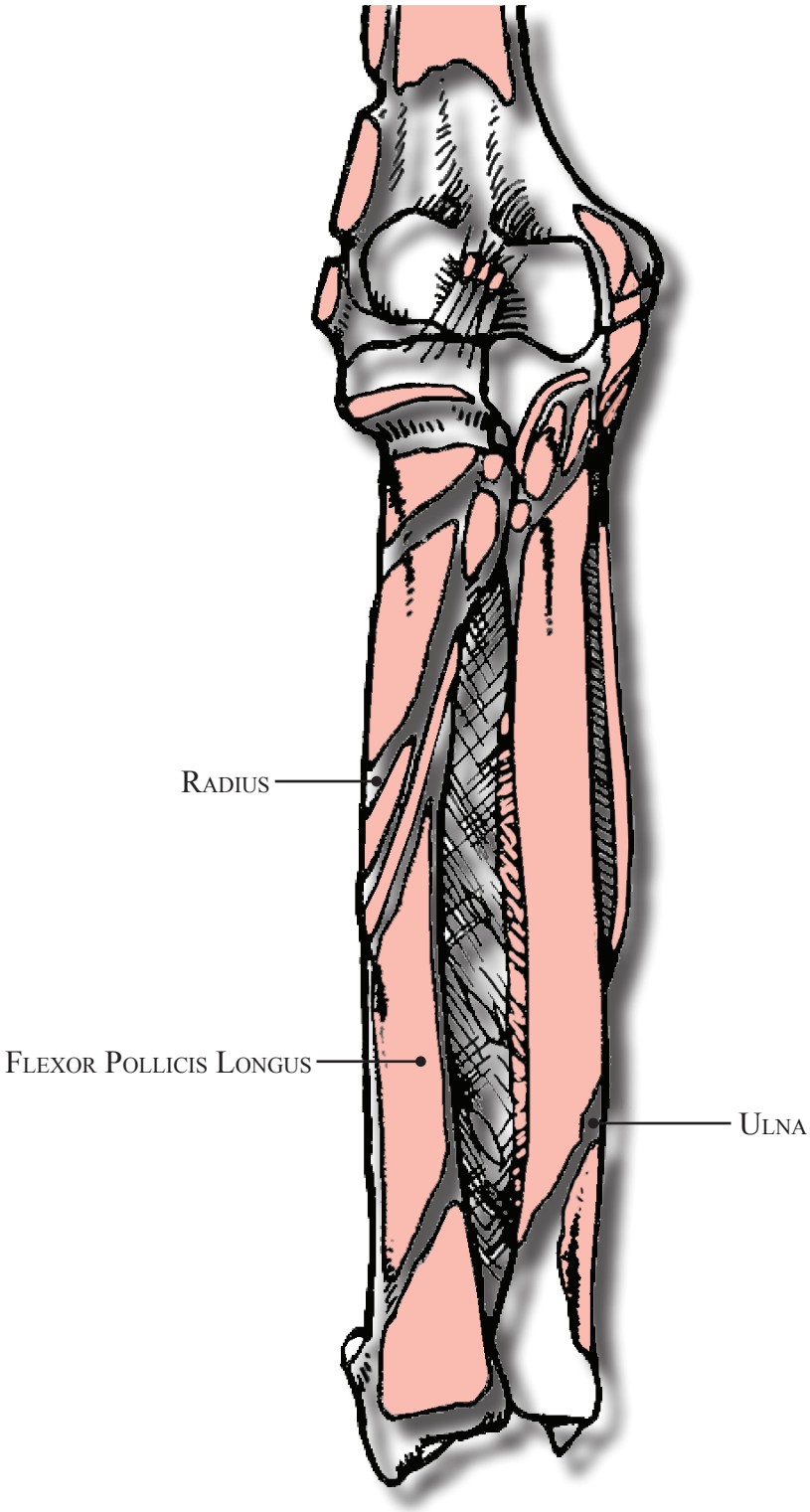
Origin and Insertion

Thumb Muscles



Posterior View of Right Forearm

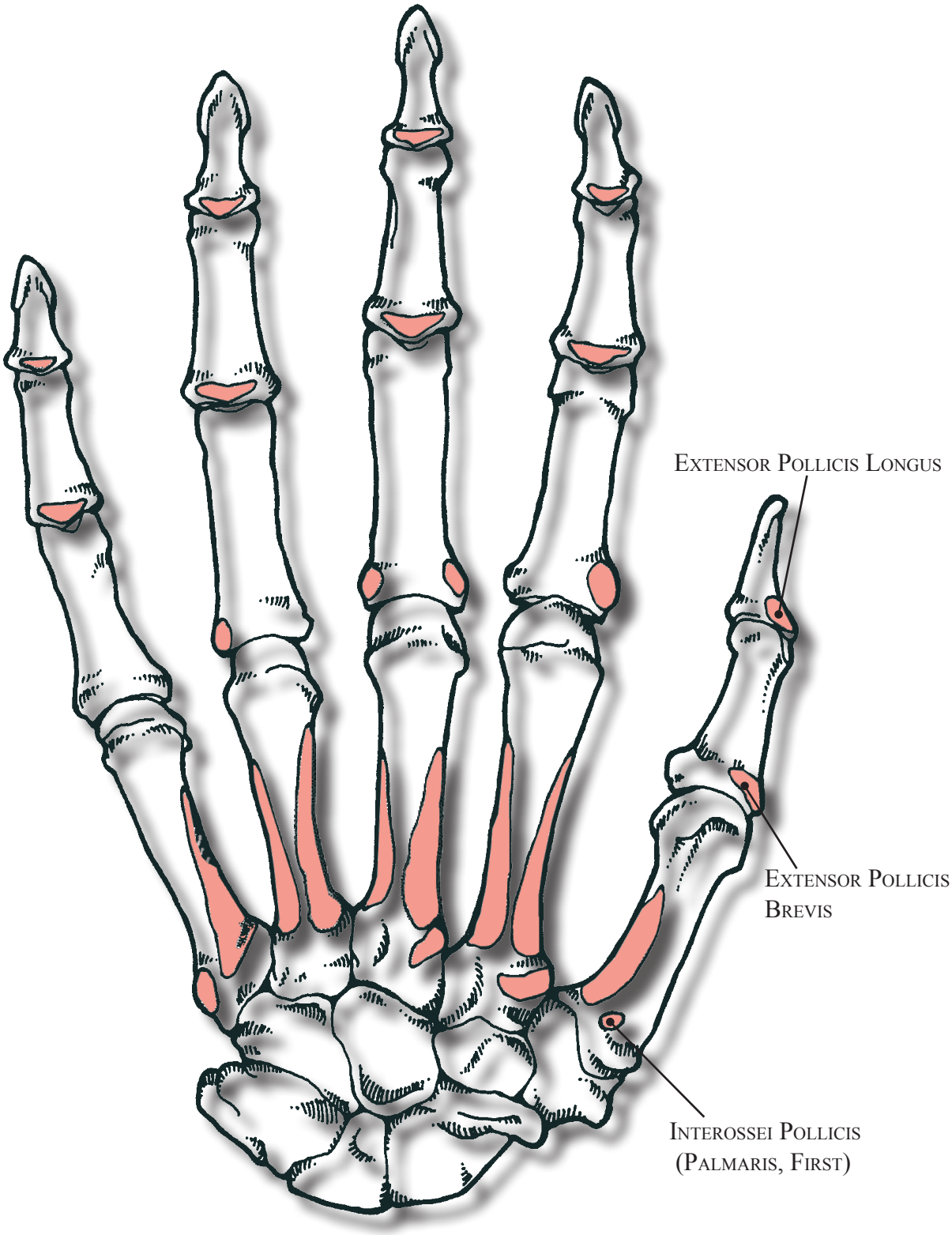
Thumb Muscles



Anterior View of Right Forearm

Origin and Insertion

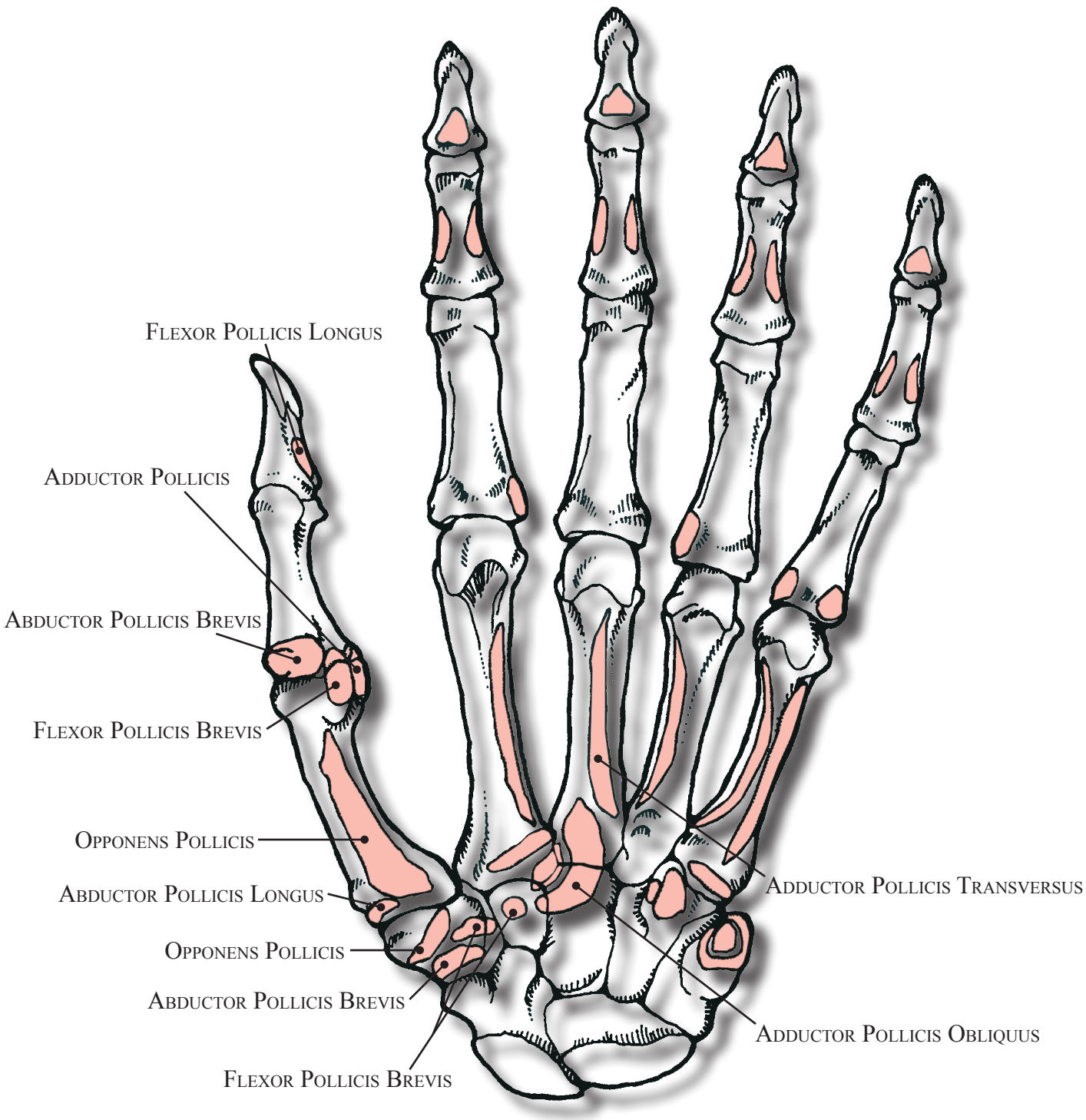
Thumb Muscles



Dorsal View of Left Hand

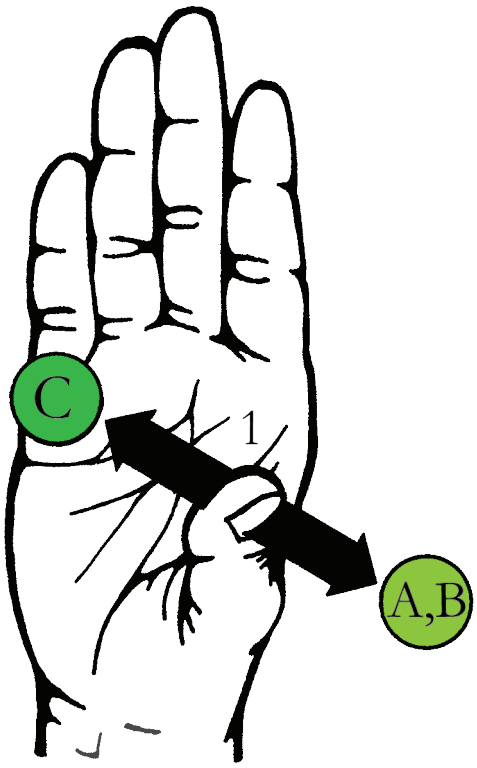
Origin and Insertion

Thumb Muscles

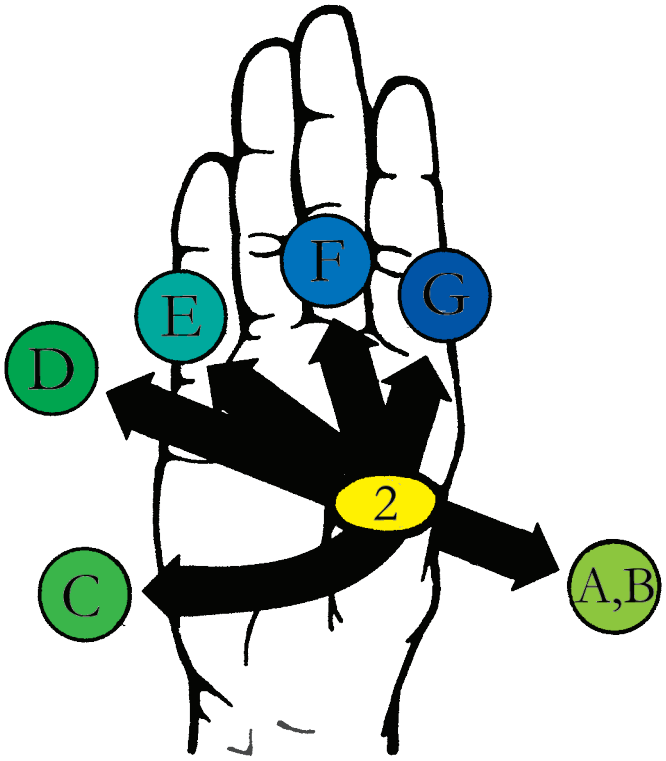


Palmar View of Left Hand

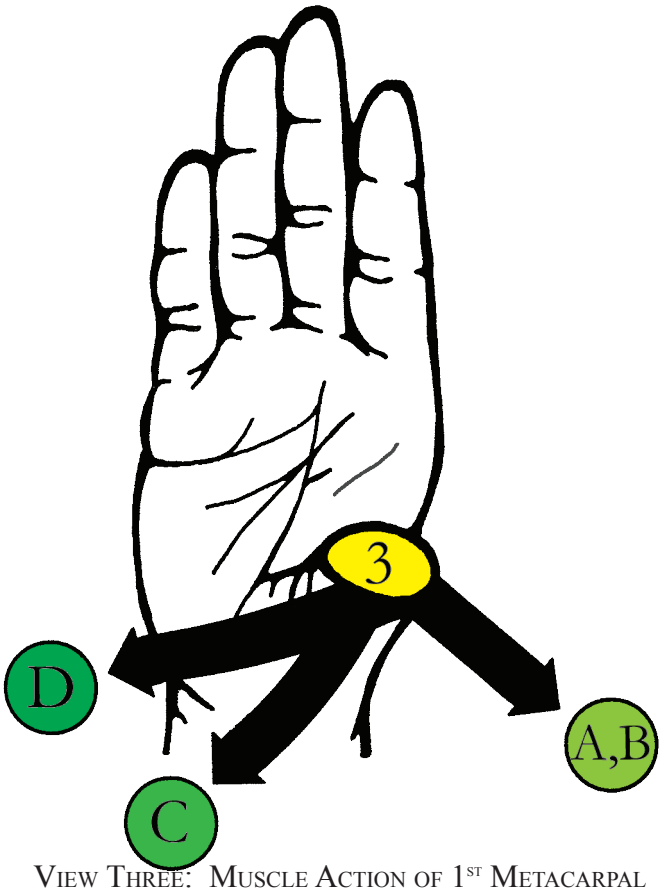
Cross Section of Thumb Muscles



View One: Muscle Action of Distal Phalanx



View Two: Muscle Action of Proximal Phalanx



View Three: Muscle Action of 1st Metacarpal

The arrows represent the directional movement of the specific muscles as identified by letters.

Thumb: View One

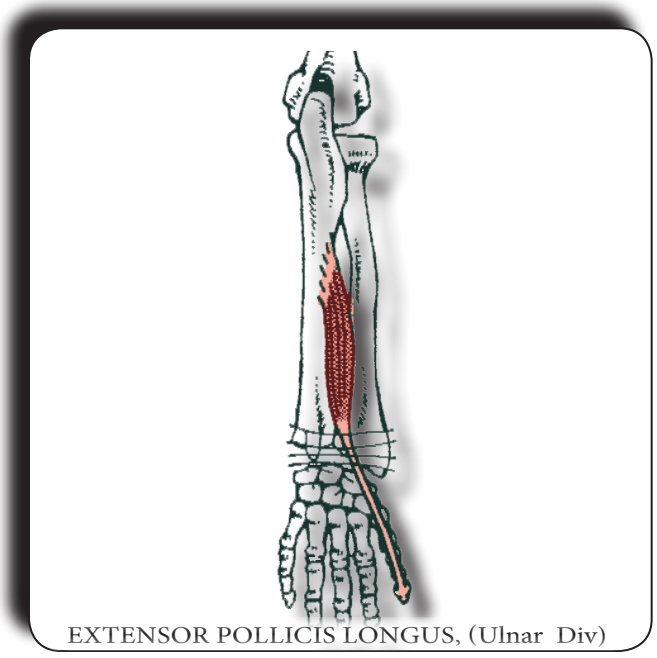
A. Extensor Pollicis Longus, Ulnar Division
B. Extensor Pollicis Longus, Septal Division
C. Flexor Pollicis Longus

Thumb: View Two

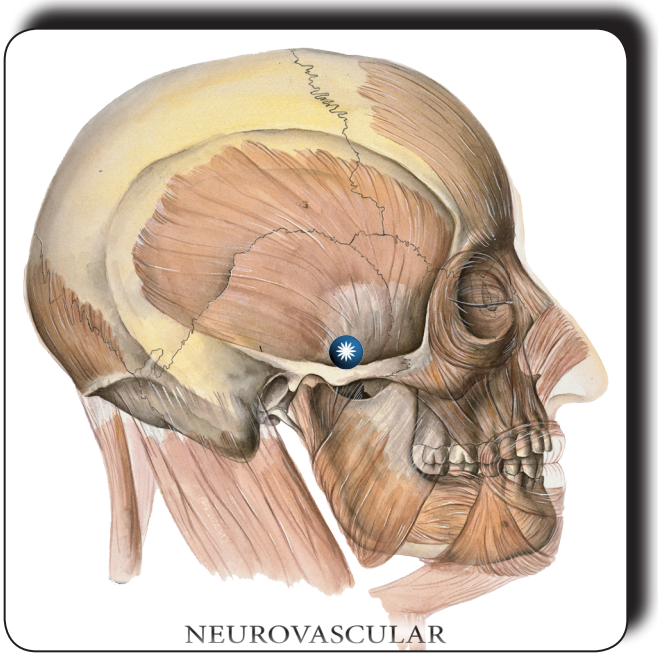
A. Extensor Pollicis Brevis, Radial Division
B. Extensor Pollicis Brevis, Septal Division
C. Abductor Pollicis Brevis
D. Flexor Pollicis Brevis
E. Adductor Pollicis Obliquus
F. Adductor Pollicis Transversus
G. Interossei Pollicis (Palmaris, First)

Thumb: View Three

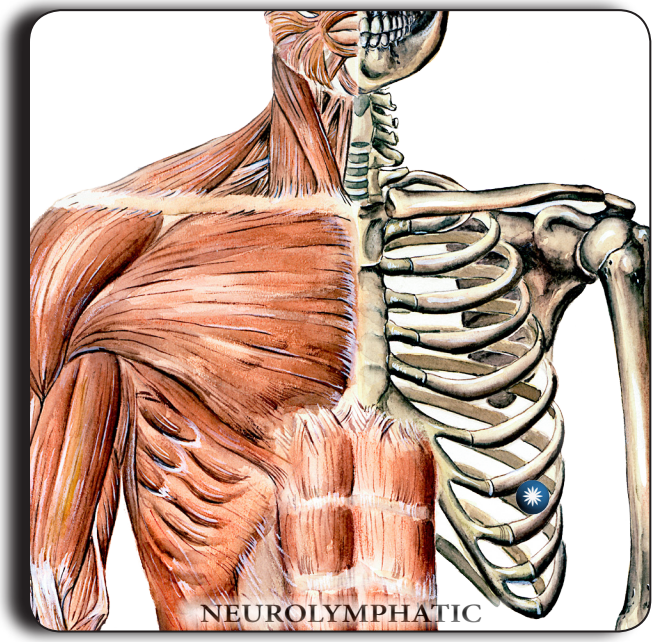
A. Abductor Pollicis Longus, Ulnar Division
B. Abductor Pollicis Longus, Radial Division
C. Opponens Pollicis, Abductor Division
D. Opponens Pollicis, Flexor Division



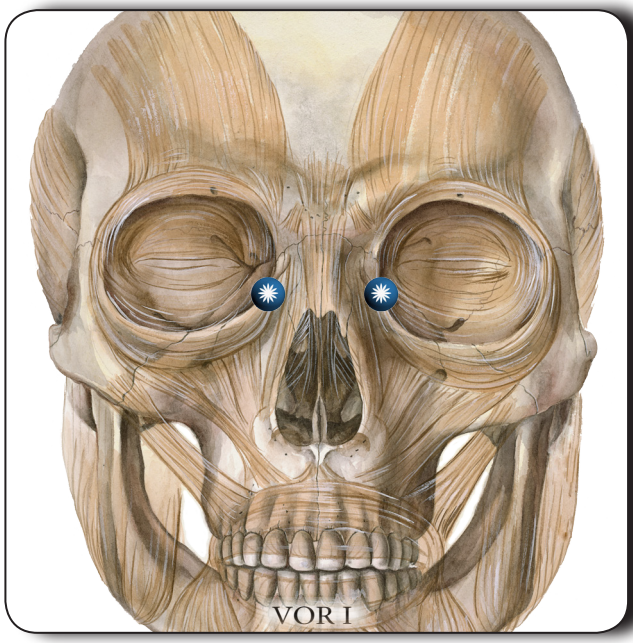
EXTENSOR POLLICIS LONGUS, (Ulnar Div)



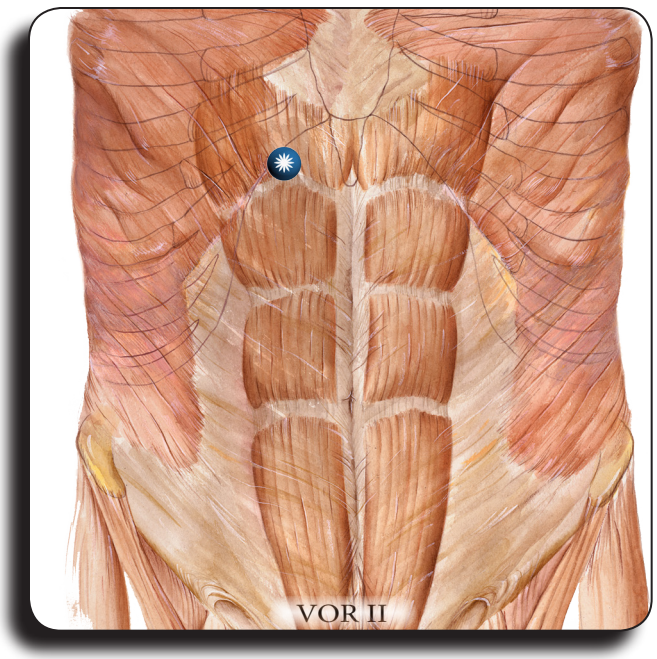
NEUROVASCULAR



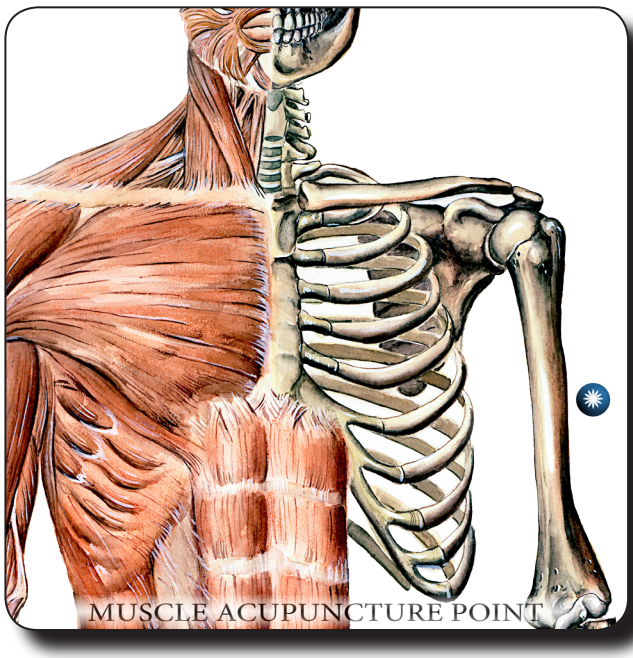
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 520: EXTENSOR POLLICIS LONGUS, (Ulnar Division)

ORIGIN: Lateral part of middle third of the dorsal surface of the ulna.

INSERTION: Base of distal phalanx of the thumb.

ACTION: Extends the distal phalanx of the thumb.

TEST:

Patient: Supine. Supinate forearm on arm. Extend distal phalanx of thumb.

Doctor: Position: Ipsilateral.
Brace: Palmer surface of proximal phalanx of thumb.
Contact: Dorsal, distal phalanx to flex thumb.

NEUROVASCULAR: (Lat) Temporal bone, squamosal section, superior to zygomatic process, 1" anterior to EAC.

NEUROLYMPHATIC: (Lat/L) 7th ICS, 1-2" posterior to costocartilage junction.

VISCERAL ORGAN:

I. *Anterior Pituitary:* (Ant/BL) Maxillary bone, medial aspect, below B1.

II. *Gallbladder Duct System:* (Ant/R) Rectus Abdominis, 4th section.

M. A. P. : Lu3

V.L. : T6L

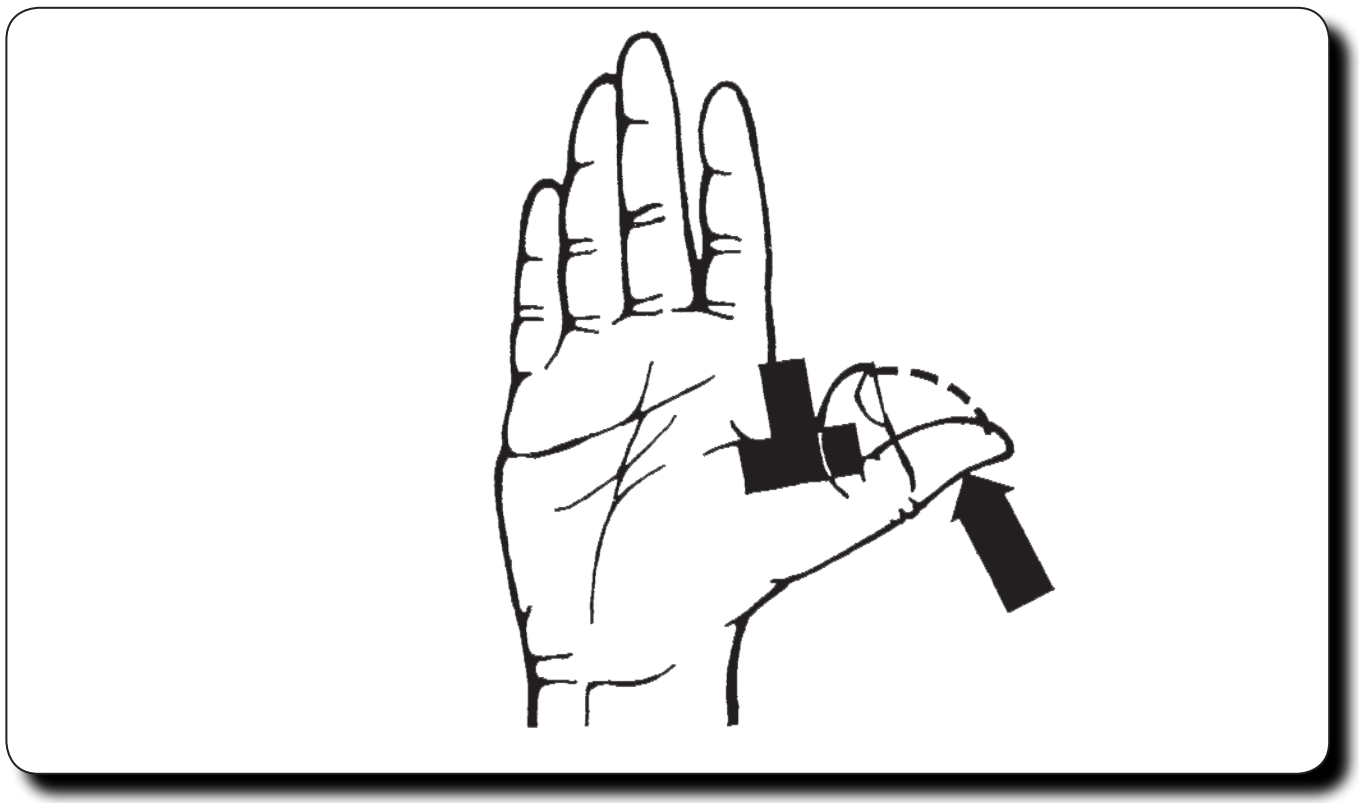
L. B. V.L. : T5L

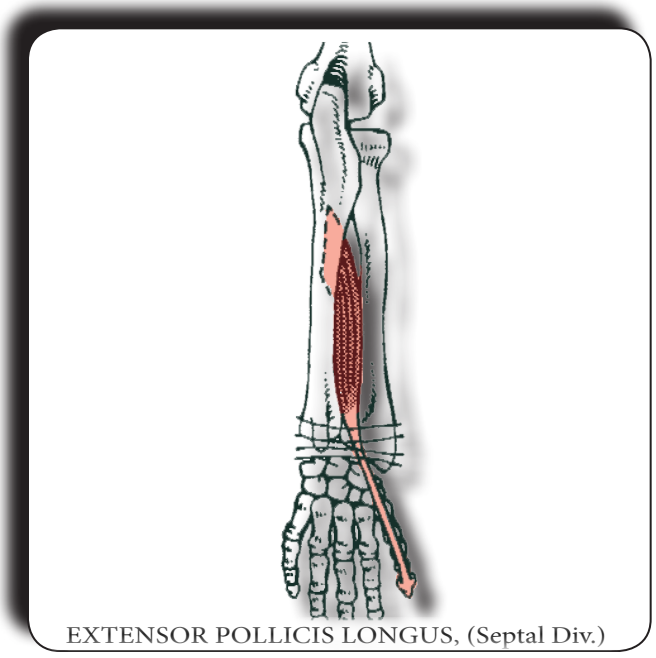
M. M. : C7

CRANIAL: Temporal

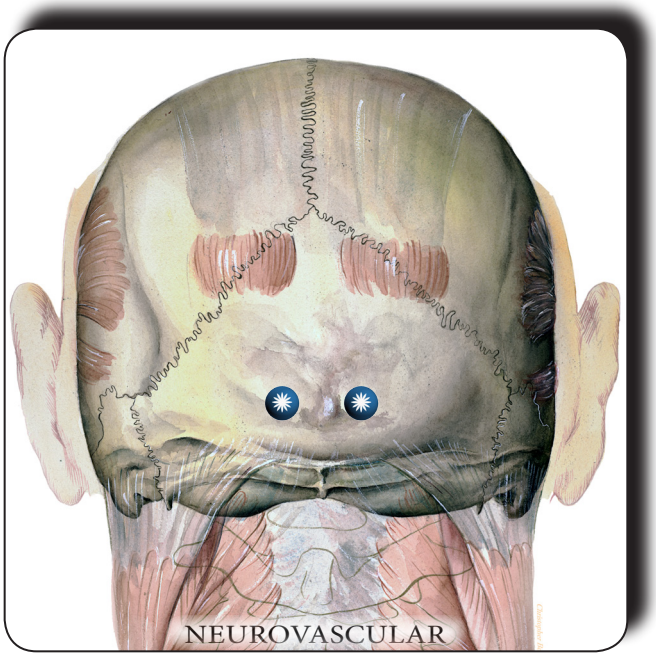
FOOT: Cuboid

NUTRIENT SOURCE:
1. Protefood (S)

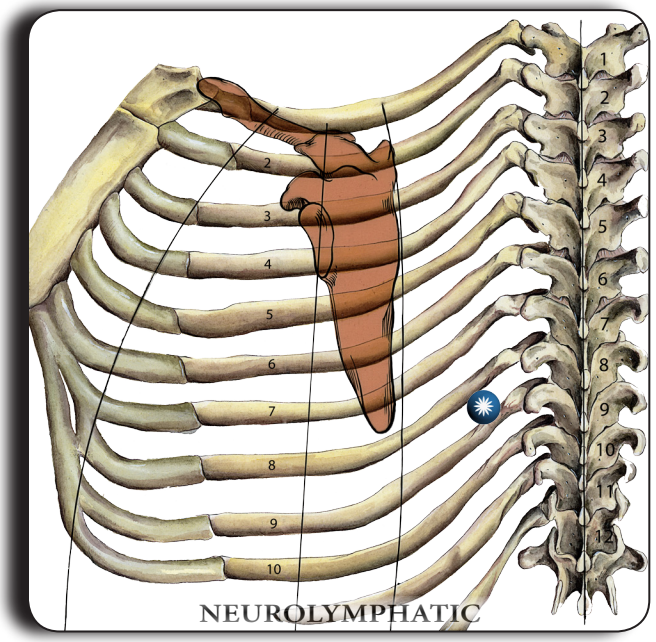




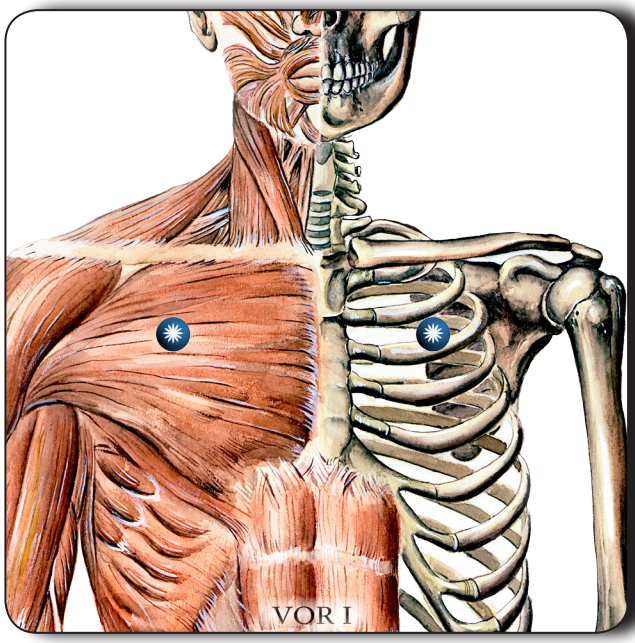
EXTENSOR POLLICIS LONGUS, (Septal Div.)



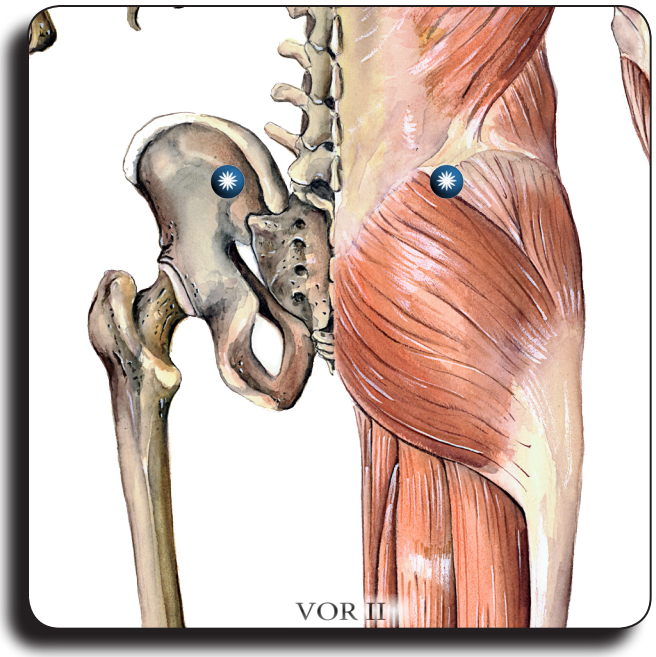
NEUROVASCULAR



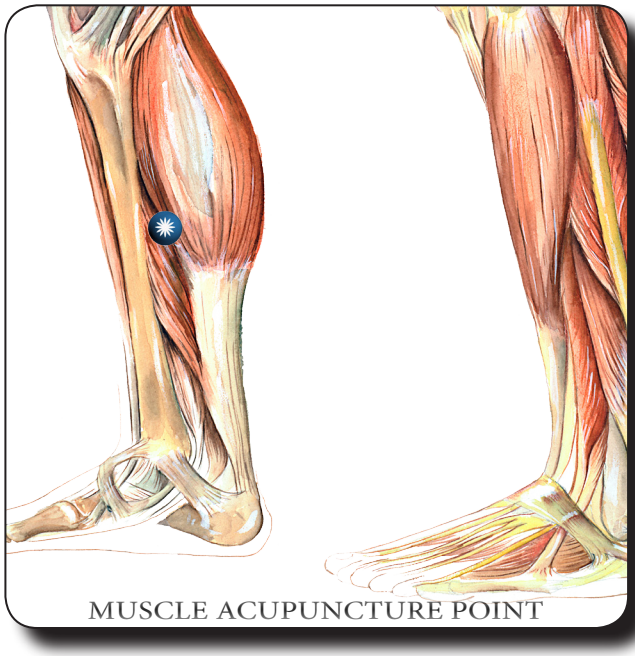
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 522: EXTENSOR POLLICIS LONGUS, (Septal Division)

ORIGIN: Middle third of the dorsal surface of the Interosseous membrane between the radius and ulna.

INSERTION: Lateral aspect of the last phalanx of the thumb.

ACTION: Extends the second phalanx of the thumb.

TEST:

Patient: Place forearm in pronated position. Extend distal phalanx on proximal phalanx of thumb.

Doctor: Position: Ipsilateral.
Brace: Medial aspect of proximal phalanx of thumb.
Contact: Distal phalanx of thumb and flex through coronal plane.

NEUROVASCULAR: (Post/BL)Occipital bone, posterior aspect, just lateral and superior to external occipital protuberance.

NEUROLYMPHATIC: (Pos/L) 8th ICS, 2" lateral to spine.

VISCERAL ORGAN:

I. *Thoracic Duct - Lymphatics:* (Ant/BL) Ribcage, 2nd ICS, midclavicular line, St15.

II. *Epididymis:* (Post/BL) Pelvis, posterior aspect, B47.6, level of L5 below iliac crest.

M. A. P. : Lv6.3

V.L. : L2R

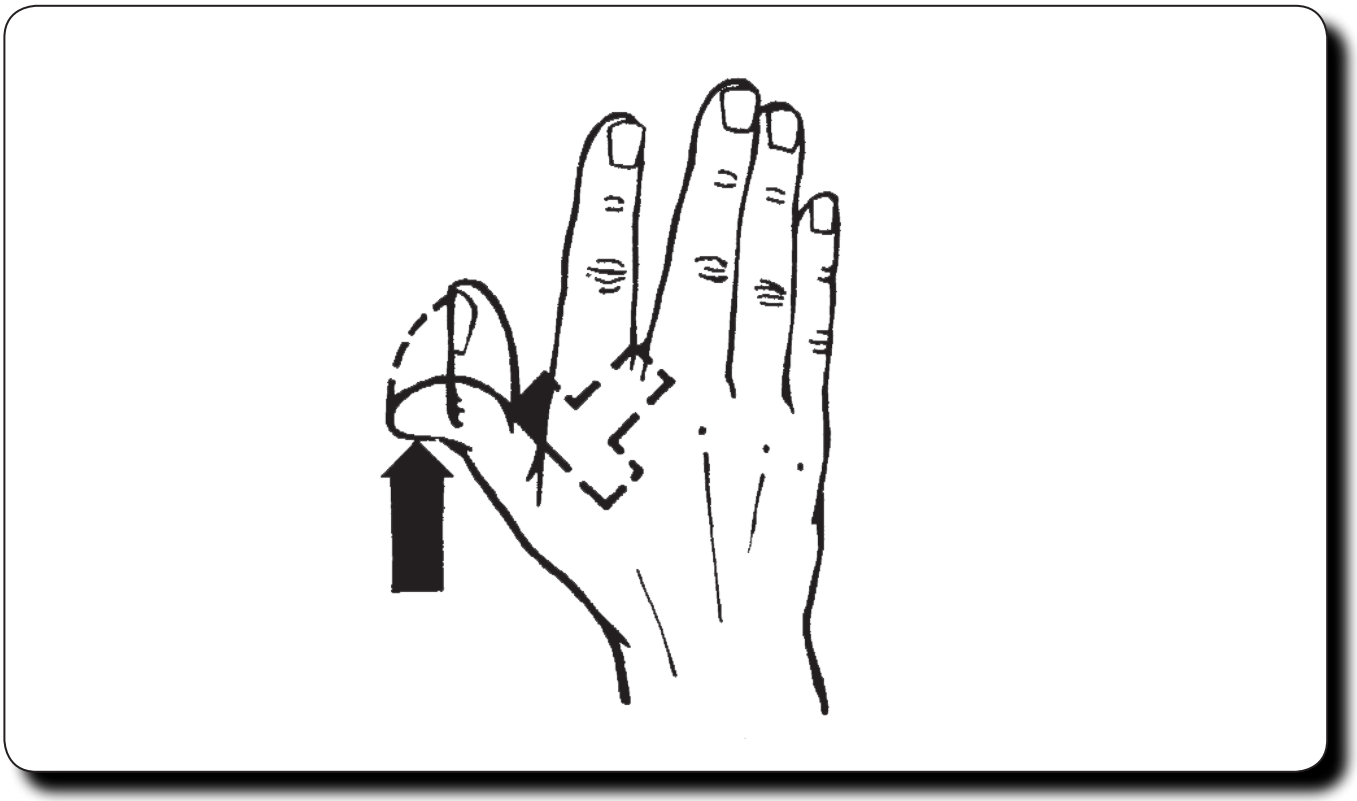
L. B. V.L. : C4R

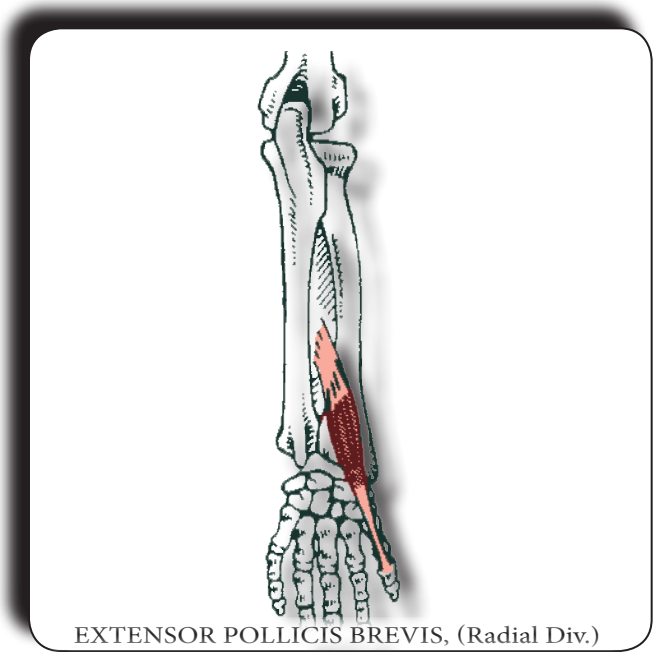
M. M. : C6

CRANIAL: Zygoma

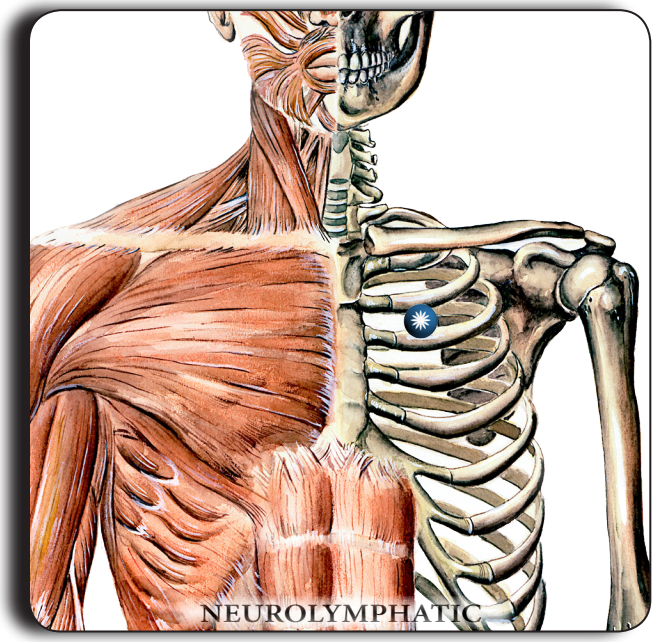
FOOT: 3rd Cuneiform

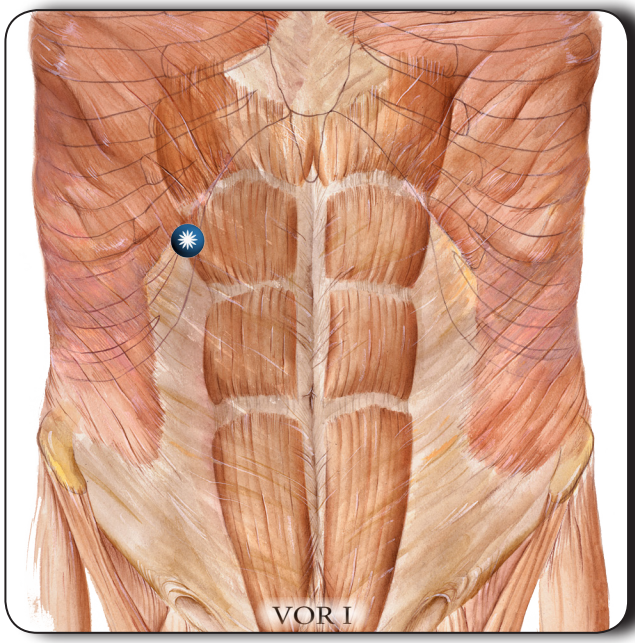
NUTRIENT SOURCE:
1. Vitamin B (S)

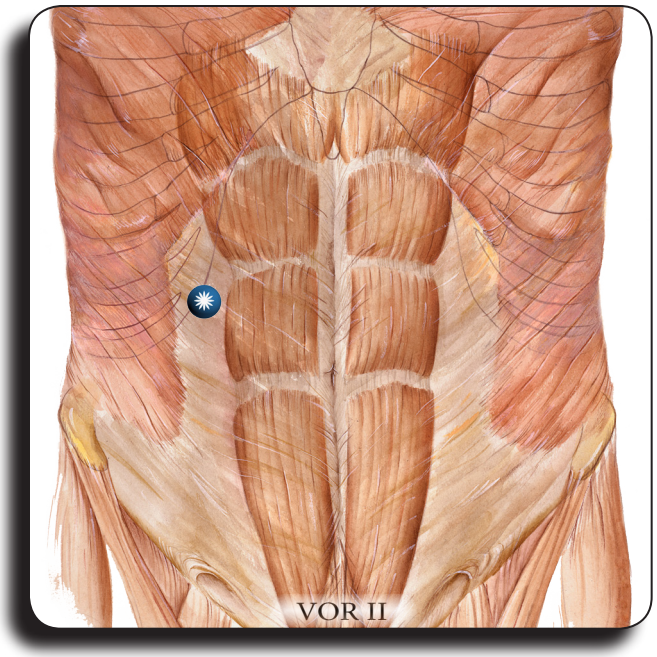


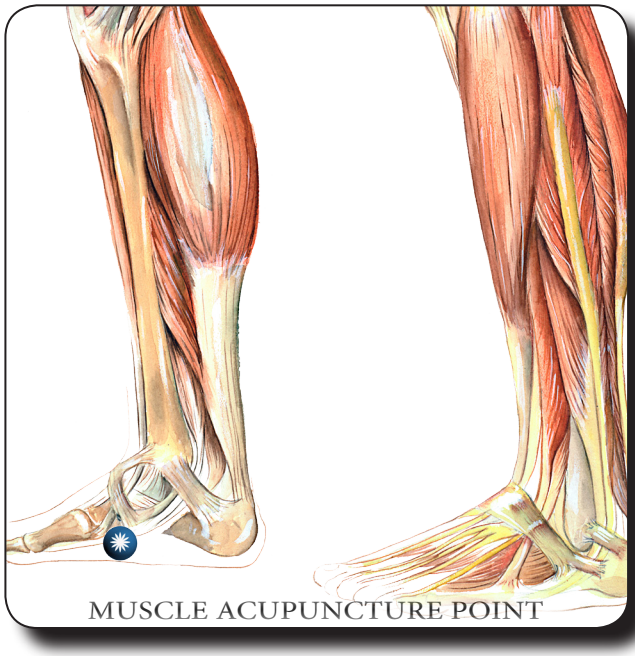

EXTENSOR POLLICIS BREVIS, (Radial Div.)

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 524: EXTENSOR POLLICIS BREVIS, (Radial Division)

ORIGIN: Lateral part of middle third of the radius.

INSERTION: Base of proximal phalanx of thumb.

ACTION: Extends the proximal phalanx of the thumb.

TEST:

Patient: Supine. Supinate forearm on arm. Extend proximal phalanx while flexing distal phalanx of thumb.

Doctor: Position: Ipsilateral.
Brace: Distal palmar surface of 1st metacarpal.
Contact: Proximal phalanx to flex thumb against resistance.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, lateral to frontal prominence.

NEUROLYMPHATIC: (Ant/L) 2nd ICS, 2-3" lateral to sternum.

VISCERAL ORGAN:

I. *Gallbladder Duct System - common Hepatic duct:* (Ant/R) Rectus Abdominis, 3rd section, superior lateral aspect.

II. *Liver:* (Ant/R) Abdomen, junction of 9th and 10th ribs.

M. A. P. : K2

V.L. : C6L

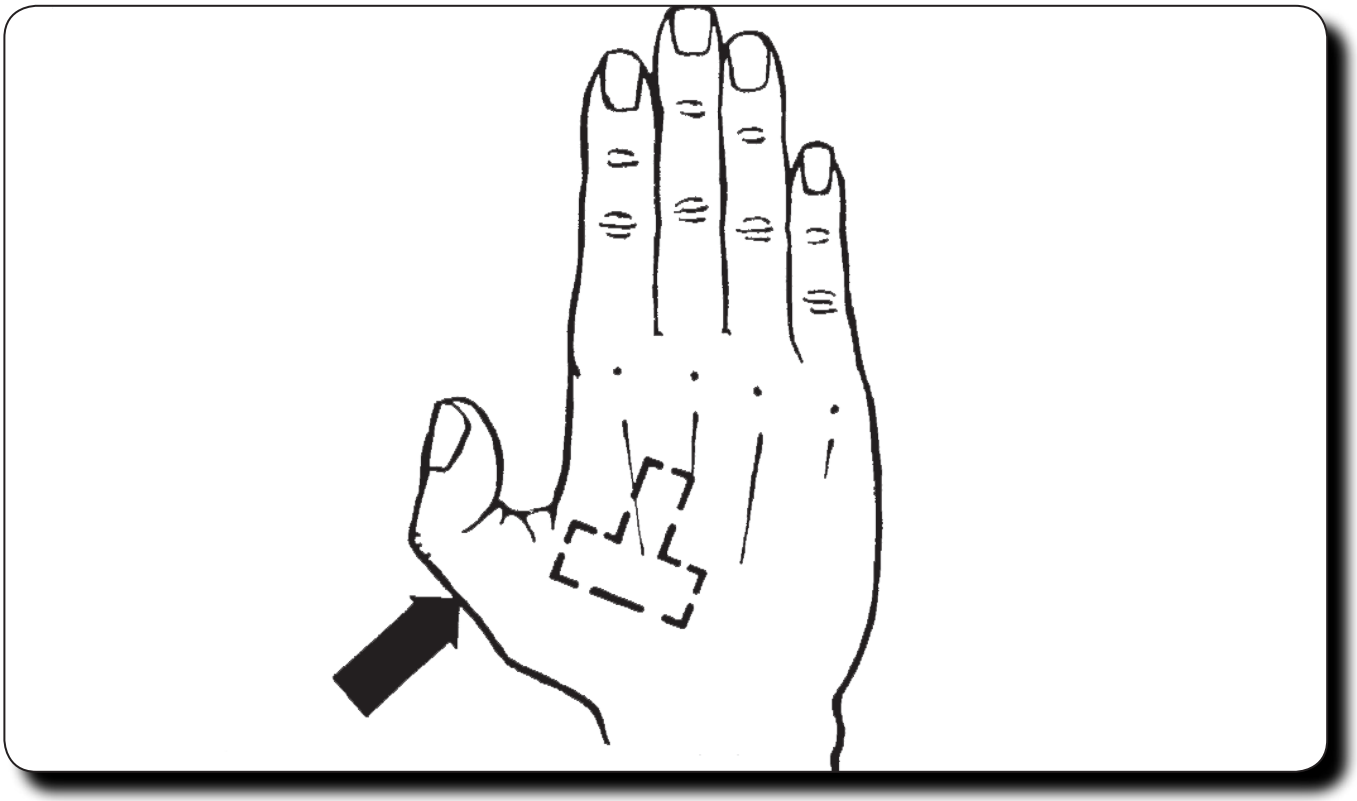
L. B. V.L. : T12L

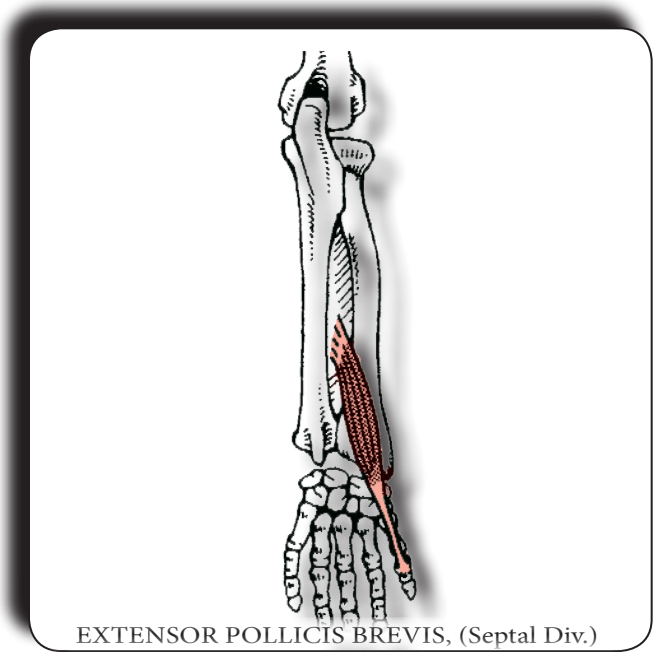
M. M. : T1

CRANIAL: Vomer

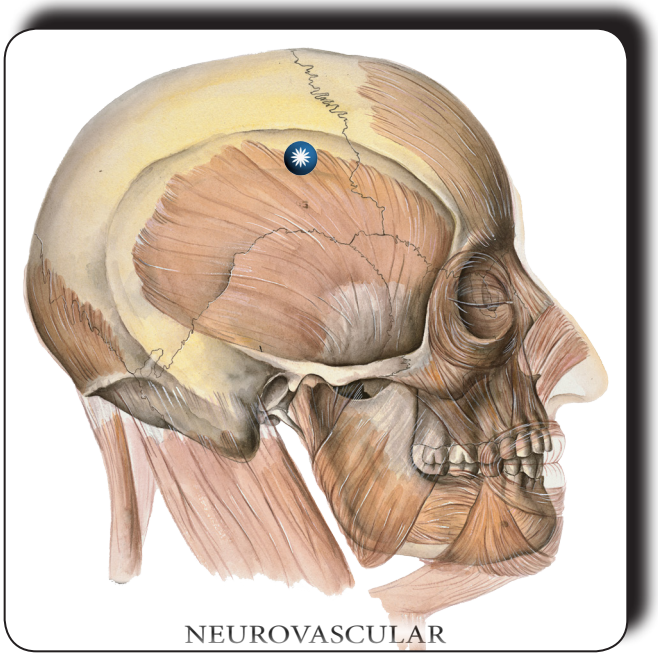
FOOT: 2nd Metatarsal

NUTRIENT SOURCE:
1. Inositol (S)

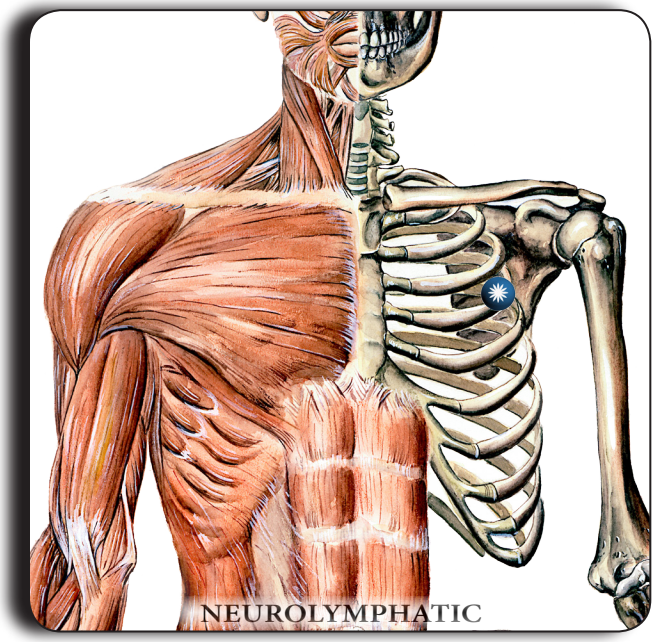




EXTENSOR POLLICIS BREVIS, (Septal Div.)

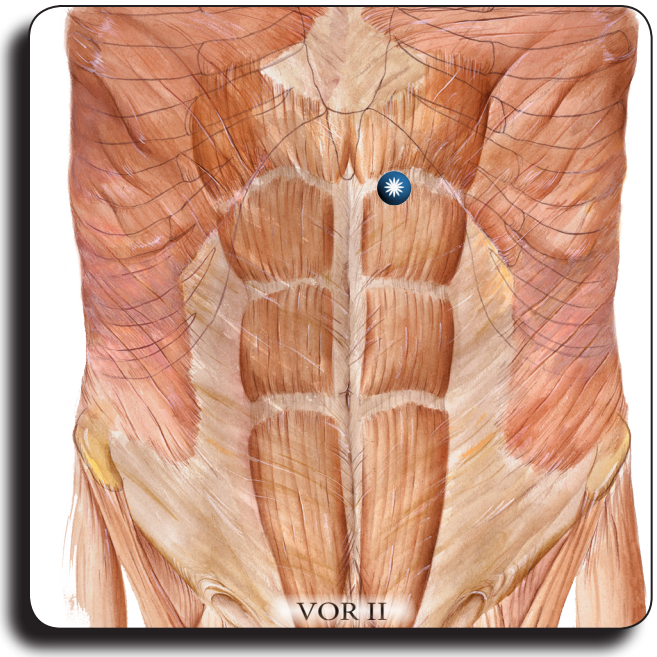


NEUROVASCULAR

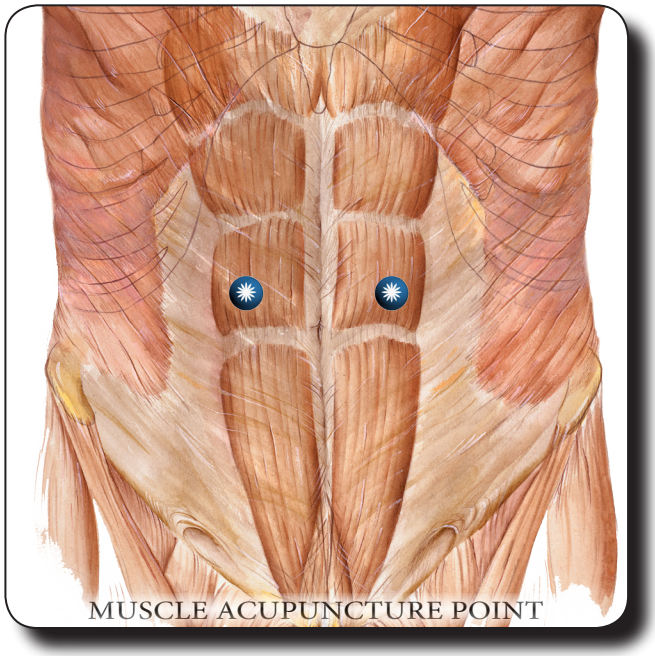


NEUROLYMPHATIC

VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 526: EXTENSOR POLLICIS BREVIS, (Septal Division)

ORIGIN: Arises from the dorsal surface of the Interosseous membrane between the radius and the ulna.

INSERTION: Base of the 1st phalanx of the thumb.

ACTION: Extends the proximal phalanx of the thumb.

TEST:

Patient: Supine. Place forearm in a pronated position. Extend 1st phalanx of thumb on 1st metacarpal.

Doctor: Position: Ipsilateral.
Brace: Distal palmar surface of 1st metacarpal.
Contact: 1st phalanx to flex through a coronal plane.

NEUROVASCULAR: (Lat) Parietal bone, lateral aspect, inferior to the superior temporal line.

NEUROLYMPHATIC: (Ant/L) 3rd ICS, lateral to midclavicular line.

VISCERAL ORGAN:

I. *Adenoids:* (Lat/BL) Upper Shoulder area, superior to midclavicular area, Li16.5.

II. *Pancreatic Duct System:* (Ant/L) Rectus Abdominis, between 3rd and 4th sections, 1" lateral to midline.

M. A. P. : St24

V.L. : C2L

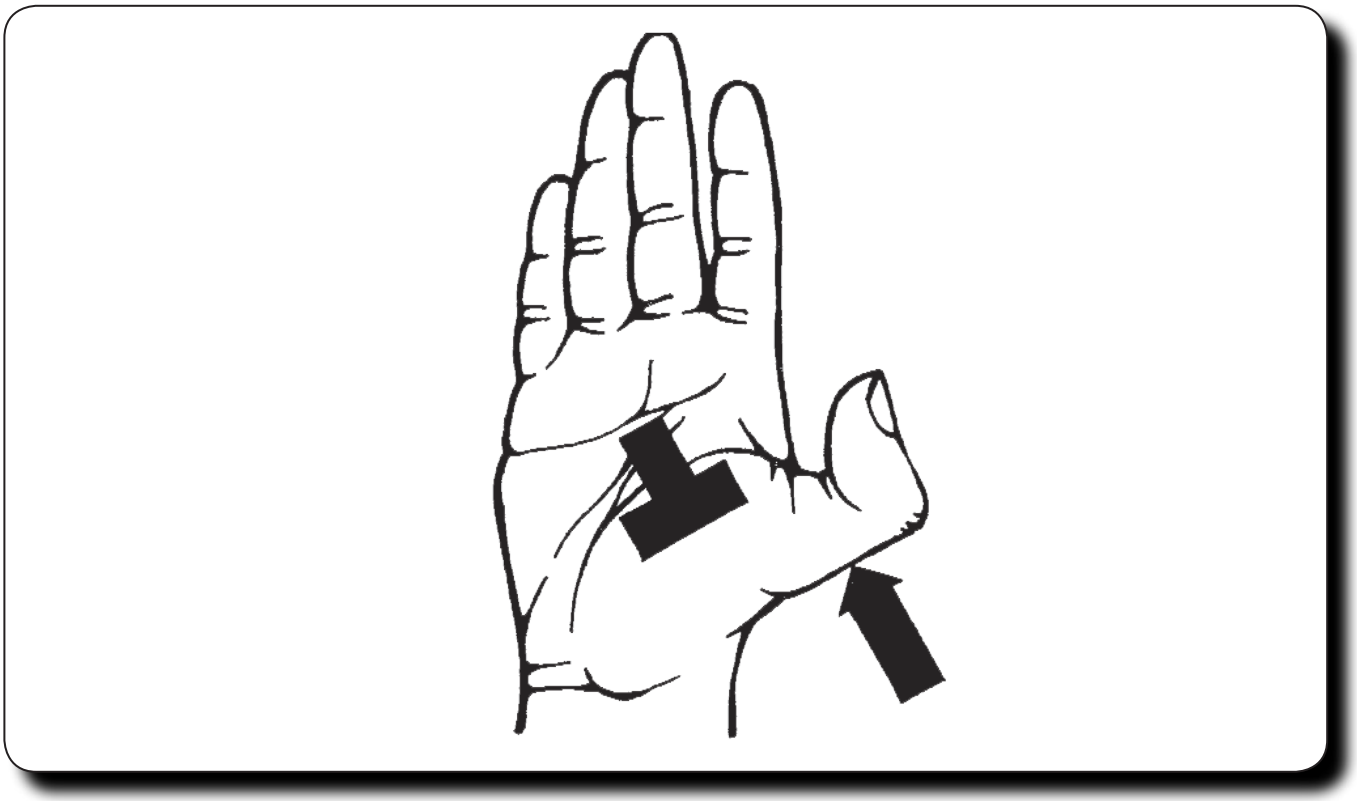
L. B. V.L. : L4L

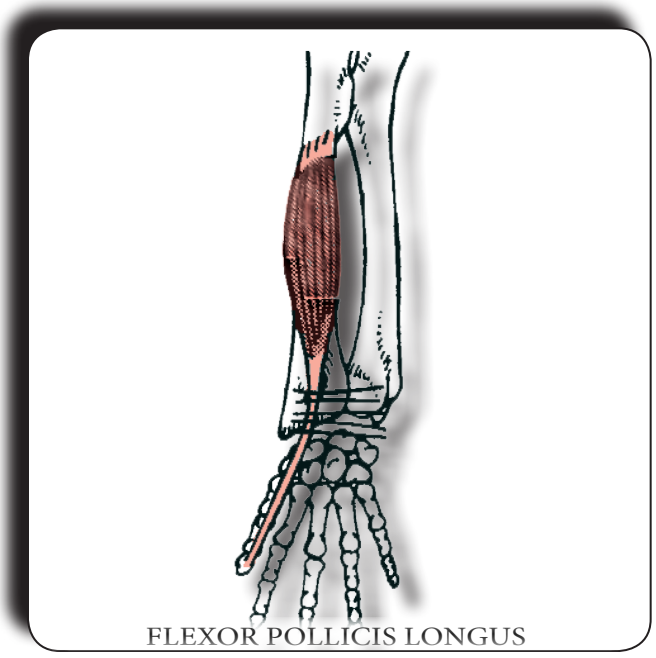
M. M. : C8

CRANIAL: Parietal

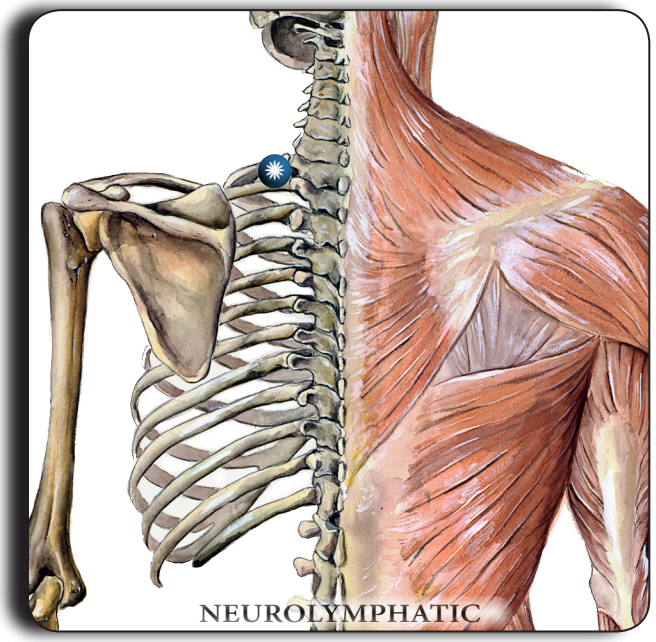
FOOT: Talus

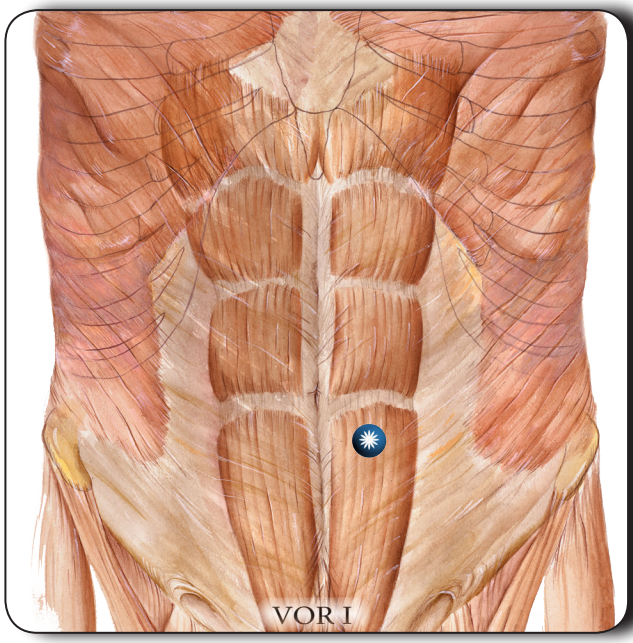
NUTRIENT SOURCE:
1. Cyruta + (S)

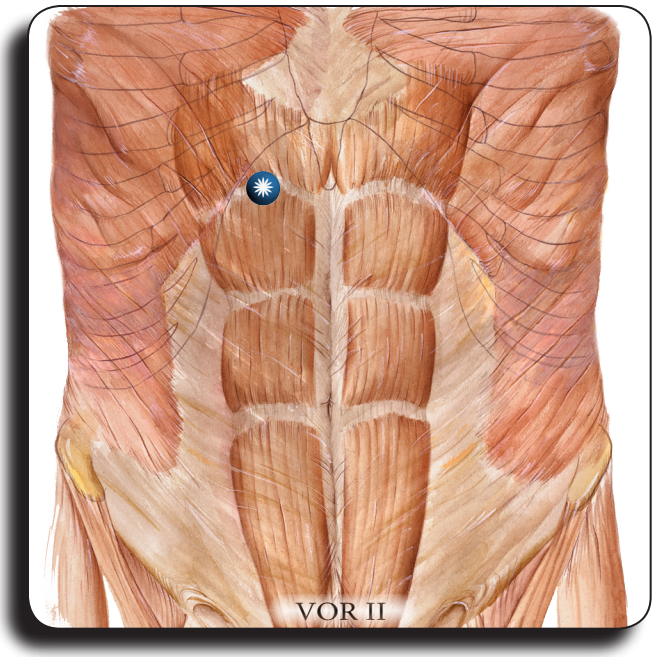


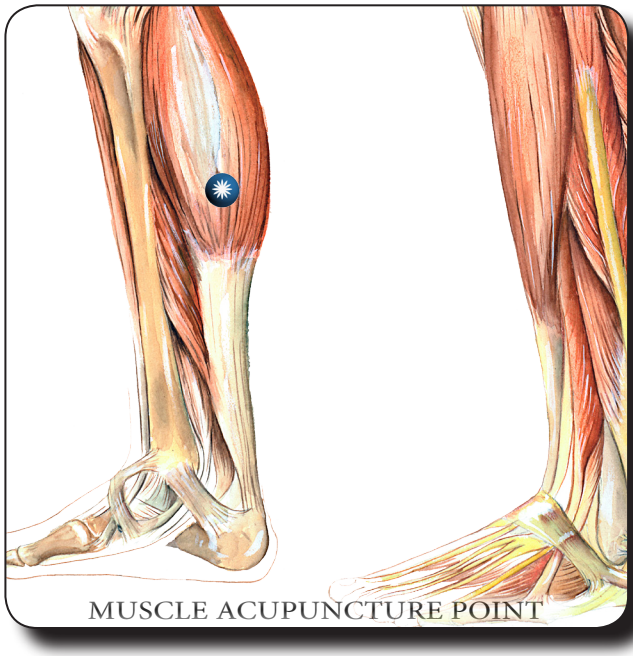

FLEXOR POLLICIS LONGUS

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 528: FLEXOR POLLICIS LONGUS

ORIGIN: Along radius from its tuberosity to origin of Pronator Quadratus, medial epicondyle of humerus.

INSERTION: Base of distal phalanx of thumb.

ACTION: Flexes the second phalanx of the thumb upon the 1st.

TEST:

Patient: Supine. Supinate forearm on arm. Flex distal phalanx.

Doctor: Position: Ipsilateral.
Brace: Distal aspect of proximal phalanx.
Contact: Palmar aspect of distal phalanx extend 2nd phalanx on 1st phalanx.

NEUROVASCULAR: (Ant/BL) Maxillary bone, anterior aspect, near zygomatic suture below eye.

NEUROLYMPHATIC: (Post/L) 1st ICS, just lateral to transverse process.

VISCERAL ORGAN:

I. *Pancreas Duct System:* (Ant/L) Rectus Abdominis, 1st section, 2" lateral and 1" inferior to umbilicus.

II. *Stomach - pyloric glands:* (Ant/R) Rectus Abdominis, 4th section, between St19 and K21.

M. A. P. : K9.3

V.L. : T7R

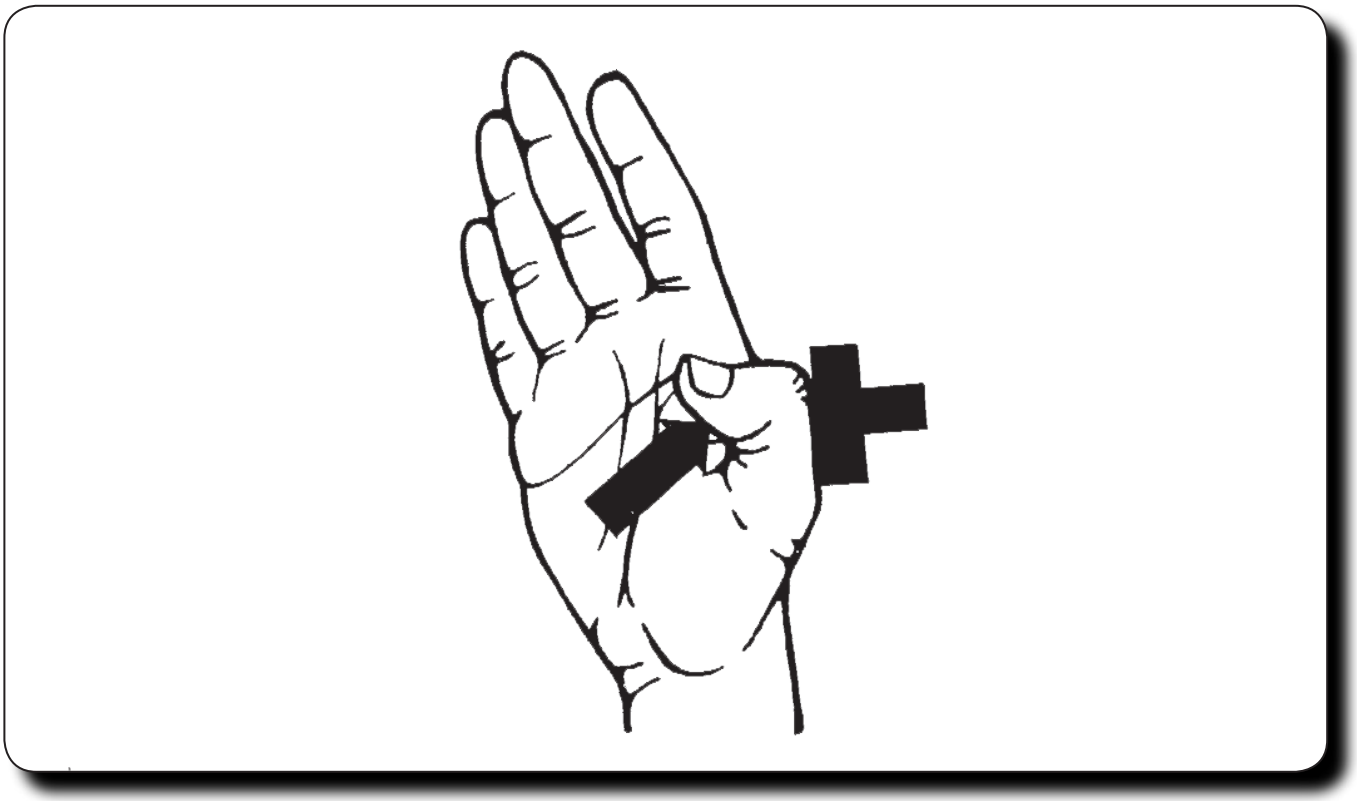
L. B. V.L. : T4R

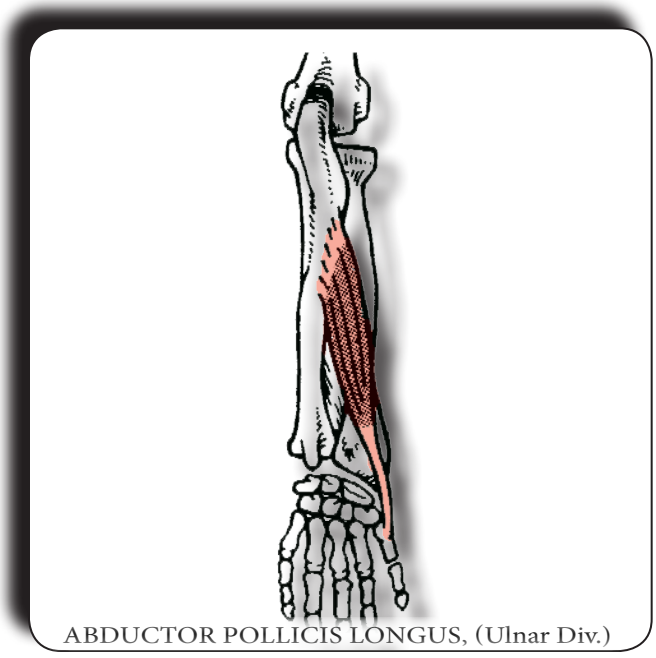
M. M. : C7

CRANIAL: Occiput

FOOT: Calcaneus

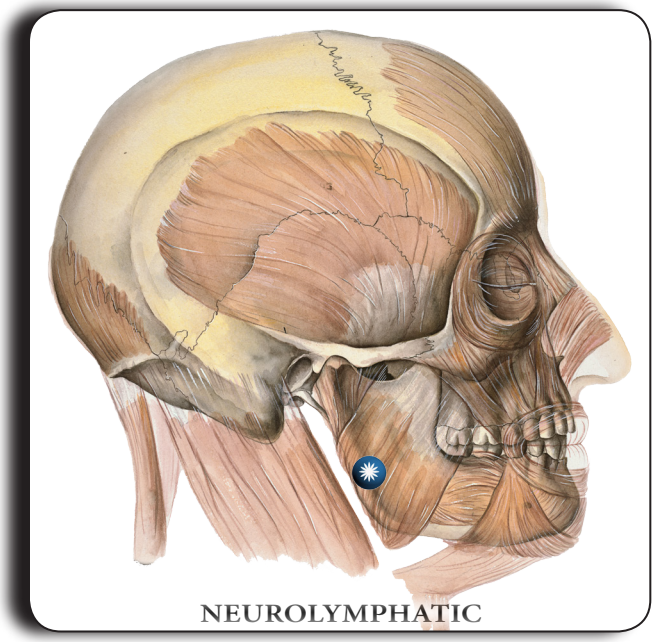
NUTRIENT SOURCE:
1. Natrum Mur-Homeopathic 6x (HP)





ABDUCTOR POLLICIS LONGUS, (Ulnar Div.)

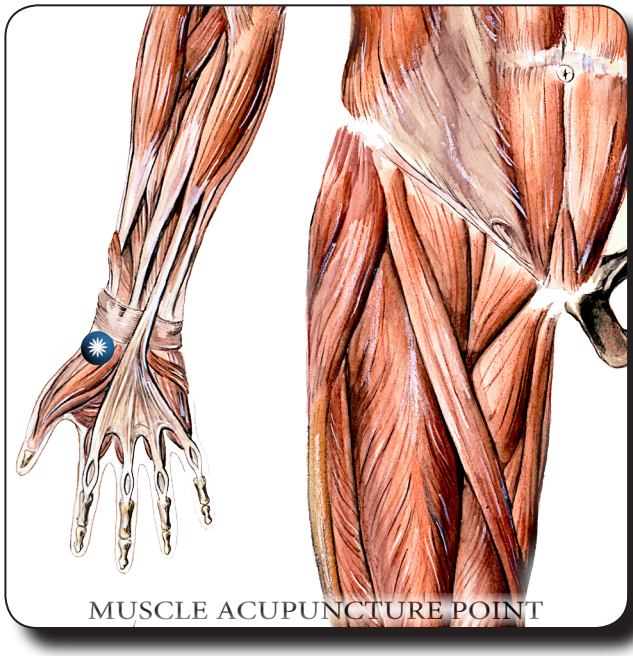
NEUROVASCULAR



NEUROLYMPHATIC

VOR I

VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 530: ABDUCTOR POLLICIS LONGUS, (Ulnar Division)

ORIGIN: Lateral part of dorsum of ulna and intermuscular septum.

INSERTION: Base of 1st metacarpal on radial side and sends an extension to the fleshy belly of Abductor Pollicis Brevis.

ACTION: Abducts 1st metacarpal and with continued action, the wrist.

TEST:

Patient: Supine. Pronate forearm on arm. Flex proximal and distal phalanx, extend and abduct 1st metacarpal of thumb.

Doctor: Position: Ipsilateral.
Brace: Palmar aspect of hand.
Contact: Distal part of 1st metacarpal to adduct through coronal plane.

NEUROVASCULAR: (Ant/BL) Nasal suture, near frontal bone.
NEUROLYMPHATIC: (Lat/BL) Mandible at angle, posterior aspect, insertion of Pterygoid Internus.

VISCERAL ORGAN:

I. *Lymphatics of neck and face:* (Lat/BL) Neck, lateral aspect, belly of Scalenus Medius at level of C4.

II. *Nose:* (Post/BL) Neck, posterior lateral aspect, transverse process of atlas, medial to G20.

M. A. P. : Lu9

V.L. : T7L

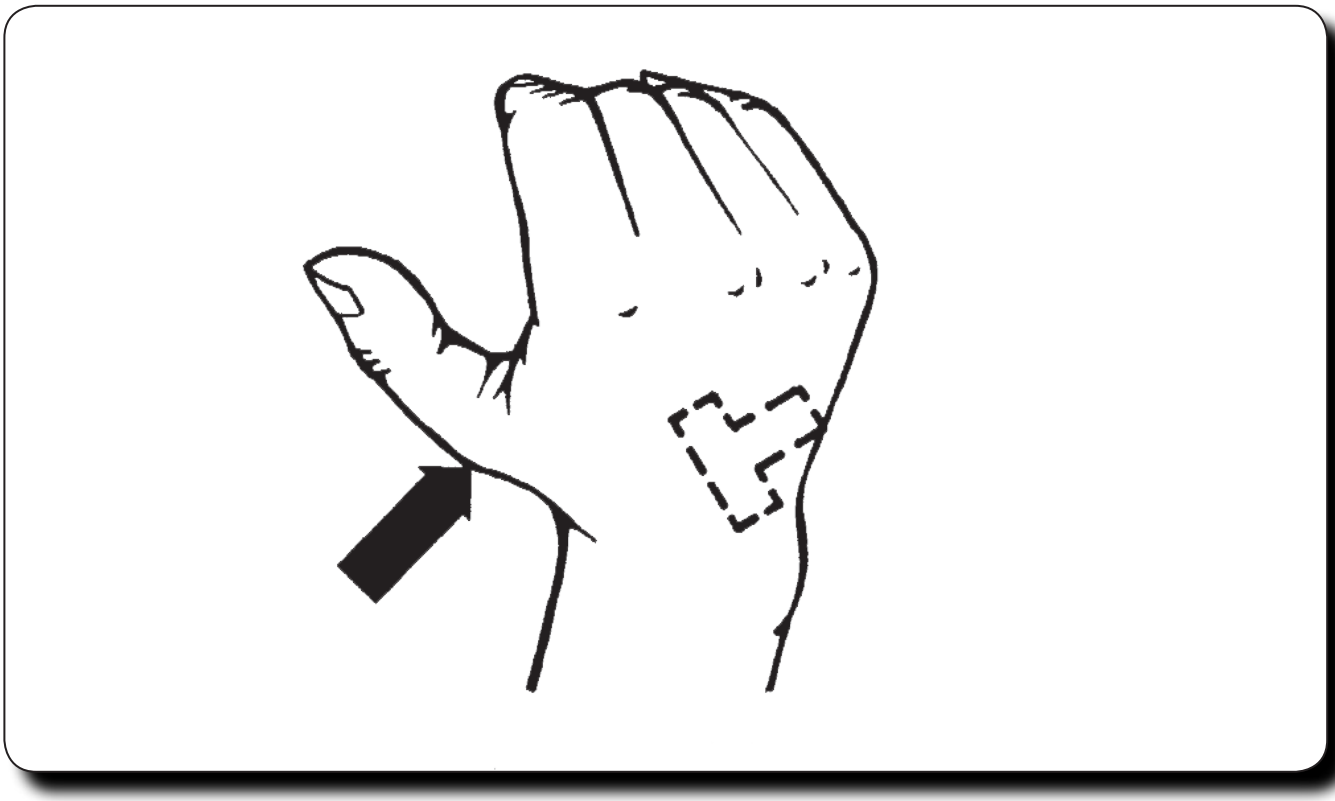
L. B. V.L. : T4L

M. M. : T2

CRANIAL: Maxillary

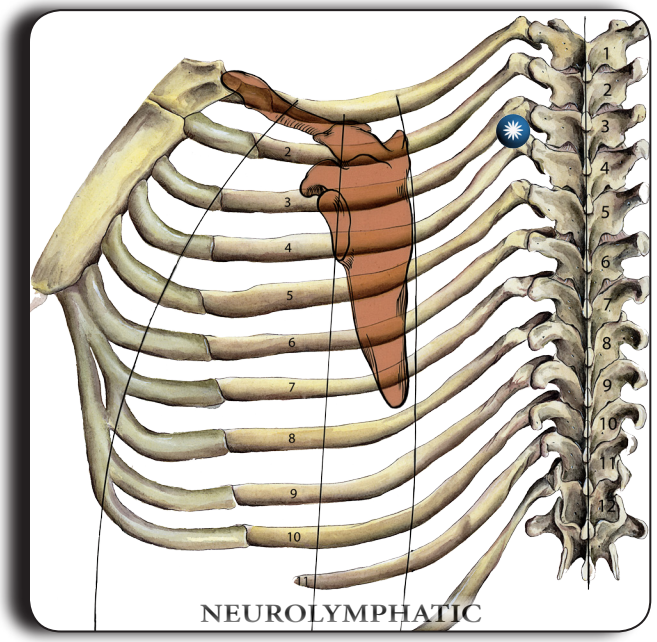
FOOT: 3rd Metatarsal

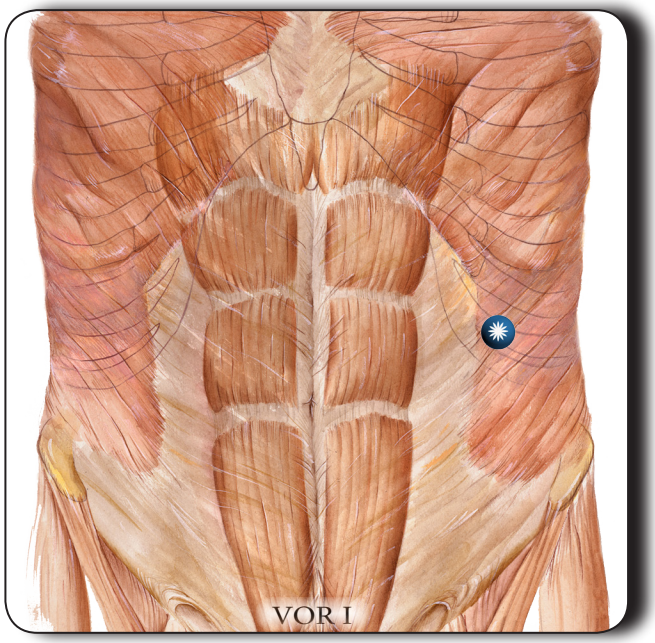
NUTRIENT SOURCE:
1. B6 with Niacinamide (S)

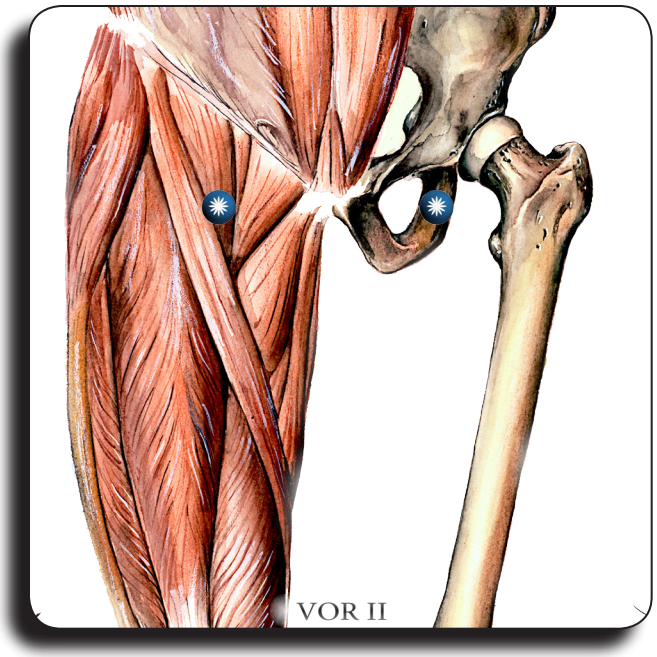


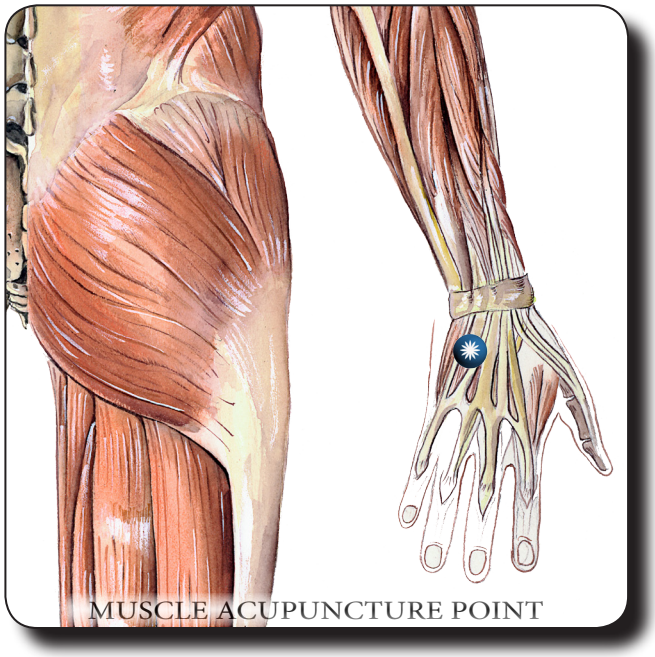
ABDUCTOR POLLICIS LONGUS, (Radial Div.)

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 532: ABDUCTOR POLLICIS LONGUS, (Radial Division)

ORIGIN: Middle third of the dorsal surface of the body of the radius.

INSERTION: Radial side of the base of the 1st metacarpal bone and trapezium.

ACTION: Abducts 1st metacarpal and with continuous action, the wrist.

TEST:

Patient: Flex distal and proximal digits of thumb. Abduct 1st metacarpal while maintaining a supinated position of forearm

Doctor: Position: Ipsilateral.
Brace: Hand.
Contact: Distal part of 1st metacarpal and adduct through coronal plane.

NEUROVASCULAR: (Ant/BL) Maxillary bone, anterior aspect, just superior to 2nd incisor.

NEUROLYMPHATIC: (Post/L) 3rd ICS, 1" lateral to spinous process.

VISCERAL ORGAN:

I. *Pancreas - Sugar:* (Ant/L) Ribcage, 9th rib at intercostal cartilage junction.

II. *Seminal Vesicles:* (Ant/BL) Pelvis, anterior aspect, lateral superior aspect of Obturator foramen.

M. A. P. : Tw3.7

V.L. : T1R

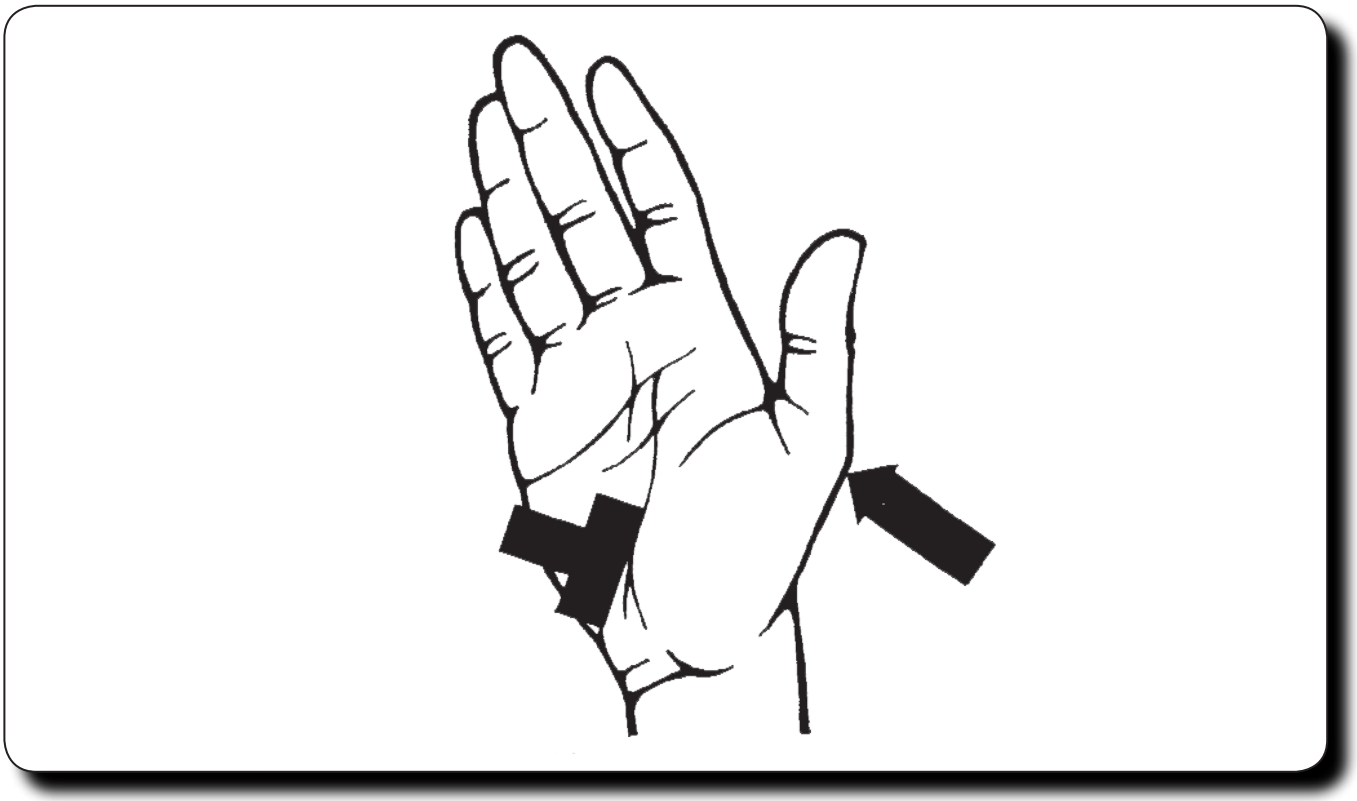
L. B. V.L. : T10R

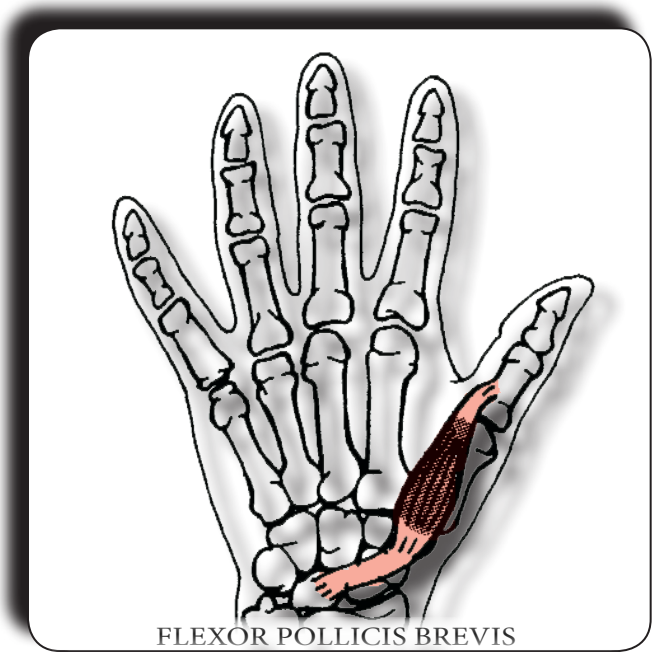
M. M. : C7

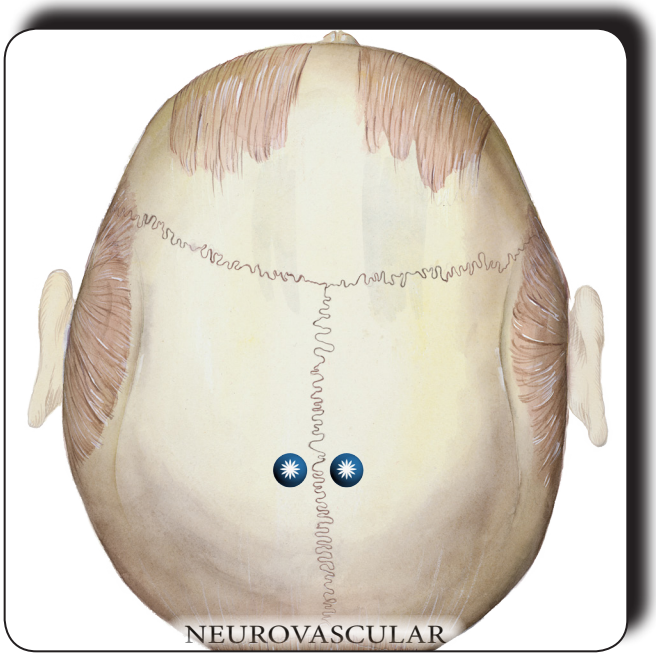
CRANIAL: Vomer

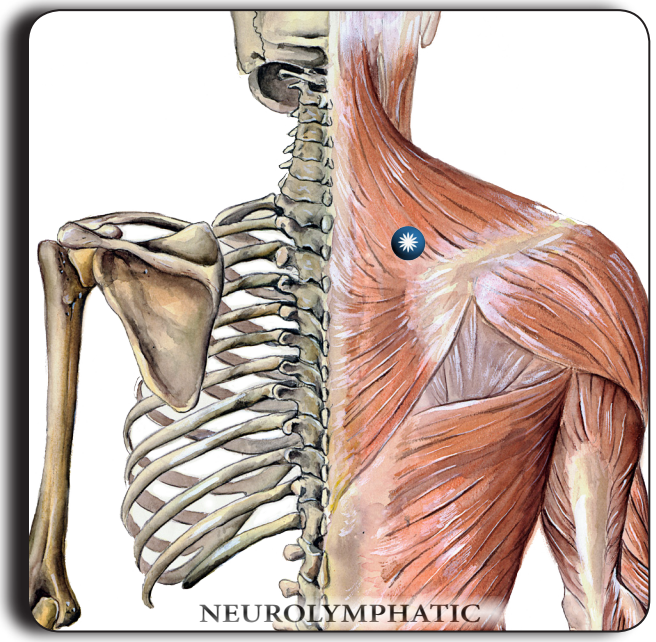
FOOT: 2nd Metatarsal

NUTRIENT SOURCE:
1. Cyruta + (S)



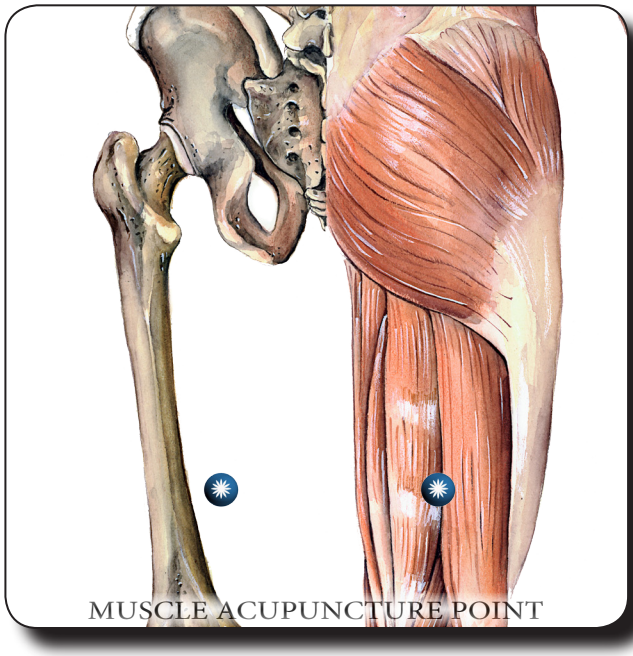

FLEXOR POLLICIS BREVIS


NEUROVASCULAR


NEUROLYMPHATIC

VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 534: FLEXOR POLLICIS BREVIS

ORIGIN: A. Superficial head: Transverse carpal ligament and trapezium bone. B. Deep head: Ulnar side of the 1st metacarpal bone.

INSERTION: The radial side of the base of the 1st phalanx of the thumb.

ACTION: Flexes and adducts the proximal phalanx of the thumb.

TEST:

Patient: Supinate hand. Flex 1st phalanx of thumb while keeping 2nd phalanx extended.

Doctor: Position: Ipsilateral.
Brace: Lateral aspect of 1st metacarpal
Contact: 1st phalanx to extend through coronal plane.

NEUROVASCULAR: (Sup/BL) Parietal bone, superior aspect, just lateral to sagittal suture, halfway between anterior and posterior fontanelle.

NEUROLYMPHATIC: (Post/R) 2nd ICS at vertebral border of scapula.

VISCERAL ORGAN:

I. *Adrenal - Cortex:* (Ant/BL) Rectus Abdominis, 1st section, K13.

II. *Adrenal - Medulla:* (Ant/BL) Rectus Abdominis, 1st section, St25.

M. A. P. : B51

V.L. : T10R

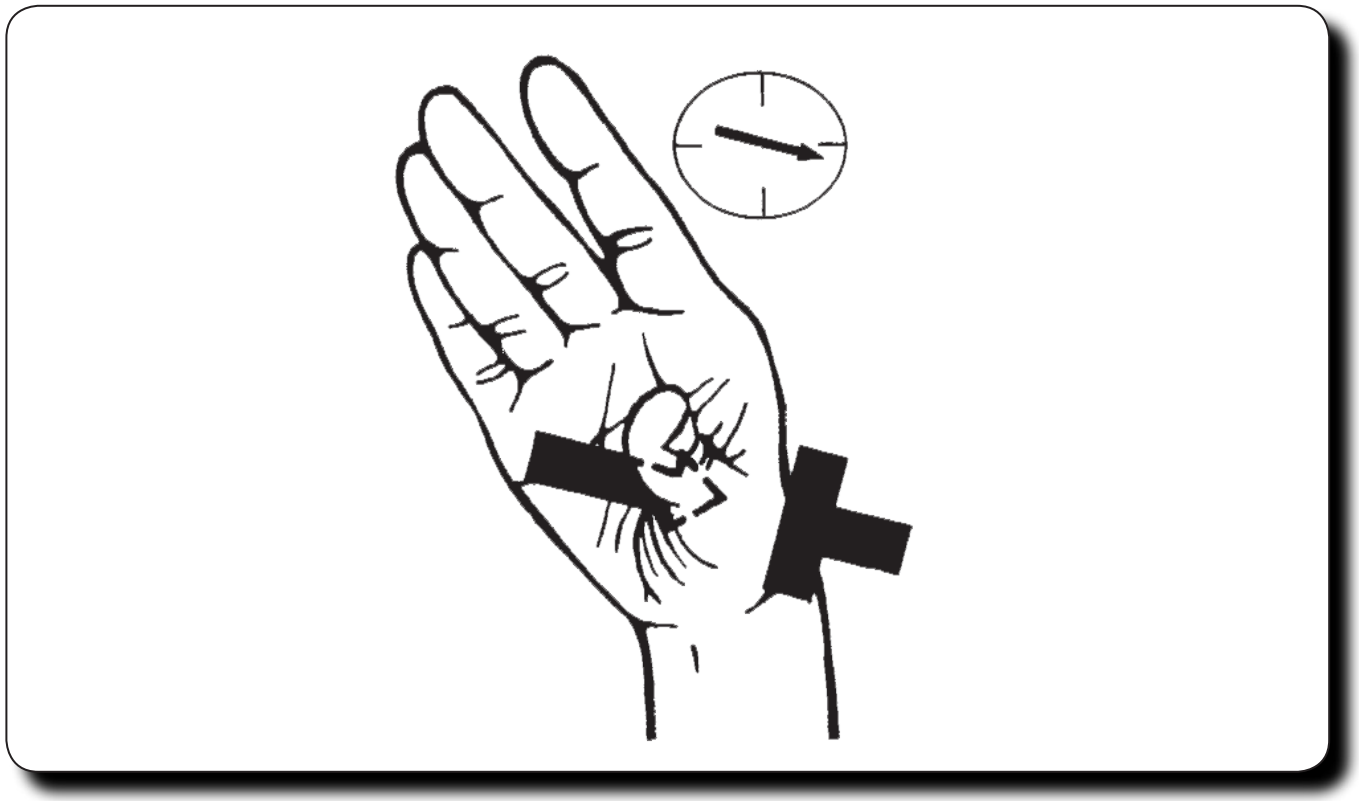
L. B. V.L. : T1R

M. M. : C8

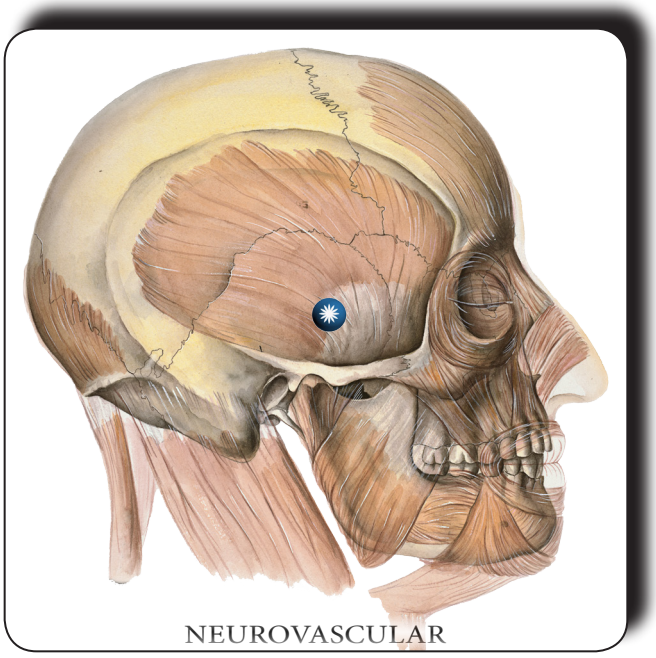
CRANIAL: Frontal

FOOT: Navicular

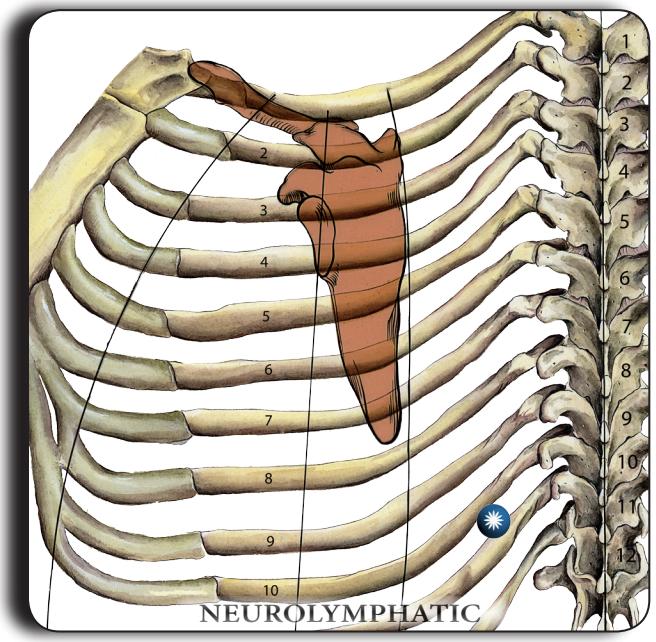
NUTRIENT SOURCE:
1. Mintran (S)



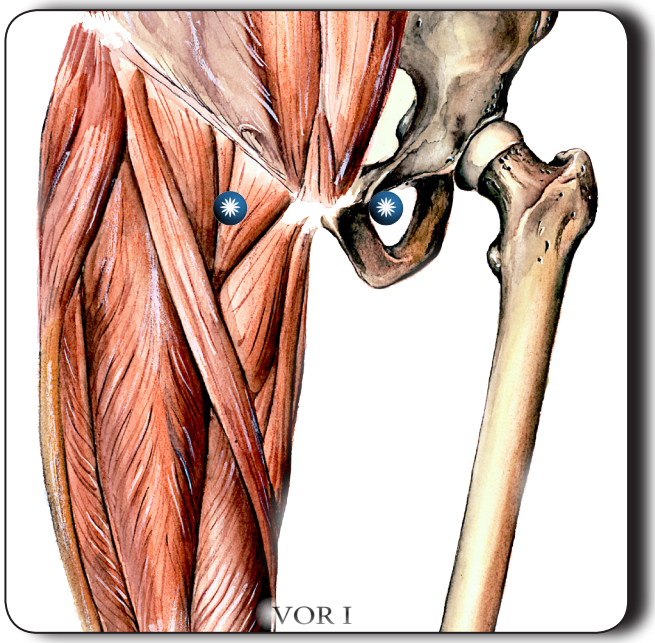
INTEROSSEI POLLICIS, (Palmaris First)



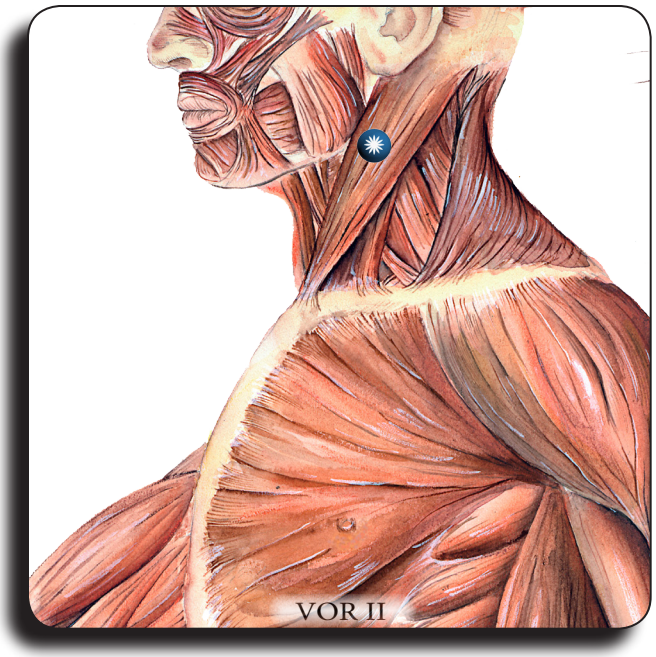
NEUROVASCULAR



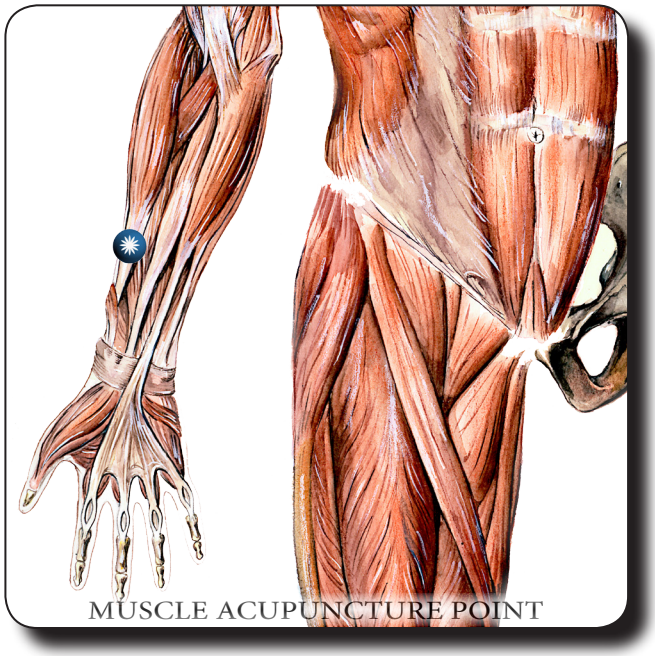
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 536: INTEROSSEI POLLICIS (Palmaris First)

ORIGIN: Ulnar side of the 1st metacarpal

INSERTION: Ulnar side of the base of the 1st phalanx of the thumb.

ACTION: Adducts the 1st phalanx of the thumb toward the 2nd metacarpal.

TEST:

Patient: Flex the 1st phalanx of the thumb until it is anterior to the 2nd metacarpal, while extending the 2nd phalanx.

Doctor: Position: Ipsilateral.
Brace: Dorsum surface of fingers.
Contact: Medial aspect of thumb to abduct thumb away from 2nd metacarpal.

NEUROVASCULAR: (Lat) Temporal bone, squamosal section, anterior and superior to EAC.

NEUROLYMPHATIC: (Post/L) 10th ICS, 3" lateral to spine.

VISCERAL ORGAN:

I. *Bladder:* (Ant/BL) Pelvis, anterior aspect, middle of Obturator foramen.

II. *Sinuses:* (Lat/BL) Neck, anterior aspect, superior part of belly of SCM muscle.

M. A. P. : Lu7.5

V.L. : L2L

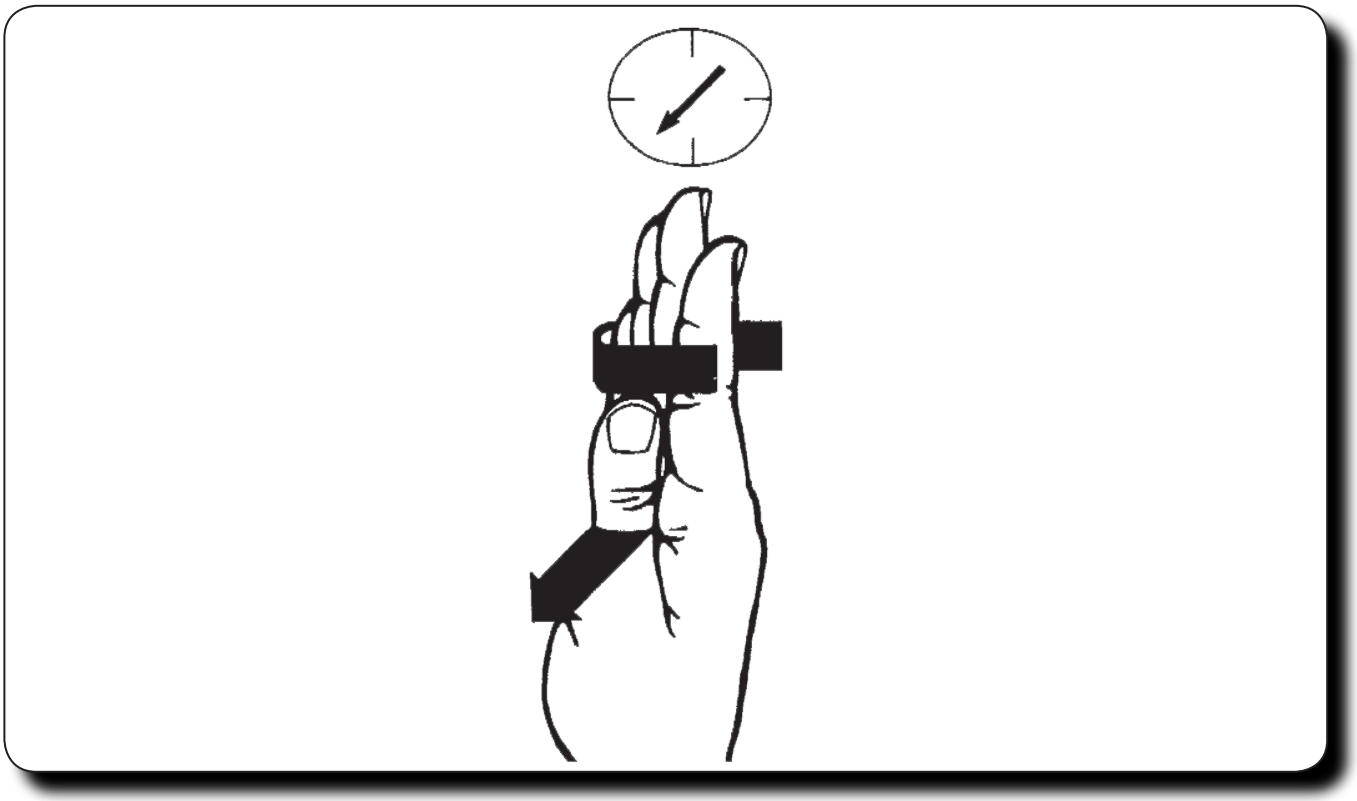
L. B. V.L. : C4L

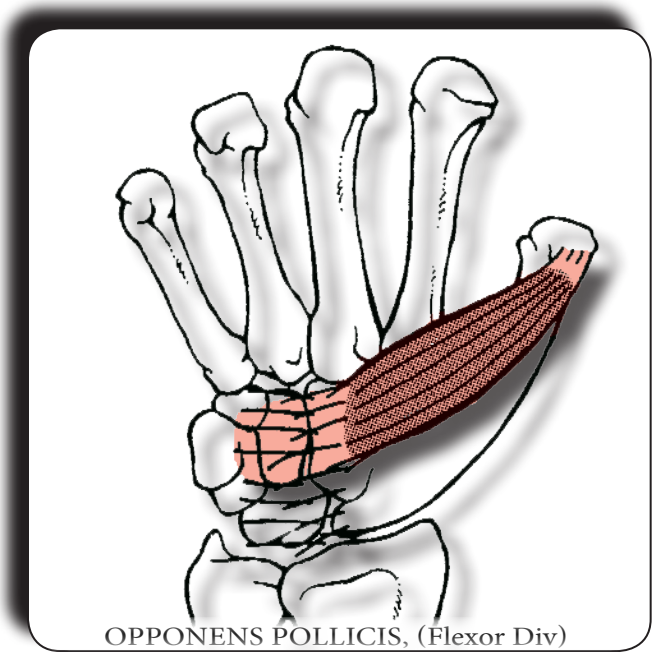
M. M. : T1

CRANIAL: Parietal

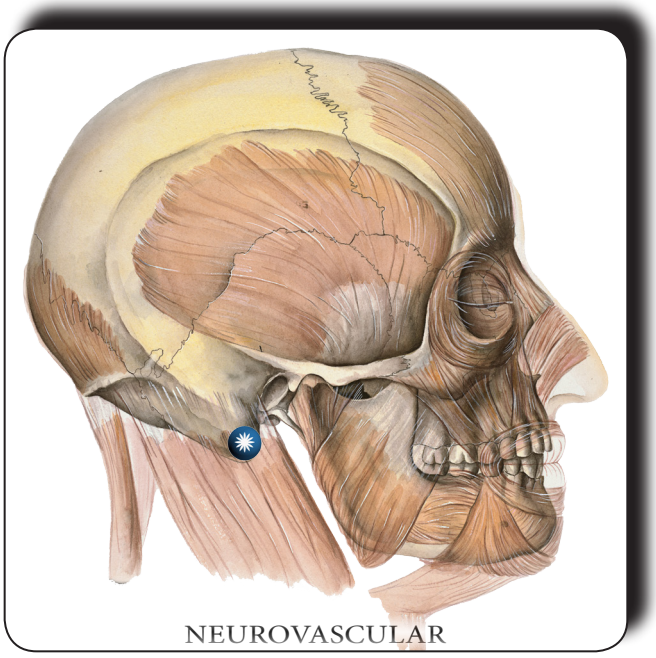
FOOT: Talus

NUTRIENT SOURCE:
1. Vitamin B12 (S)





OPPONENS POLLICIS, (Flexor Div)



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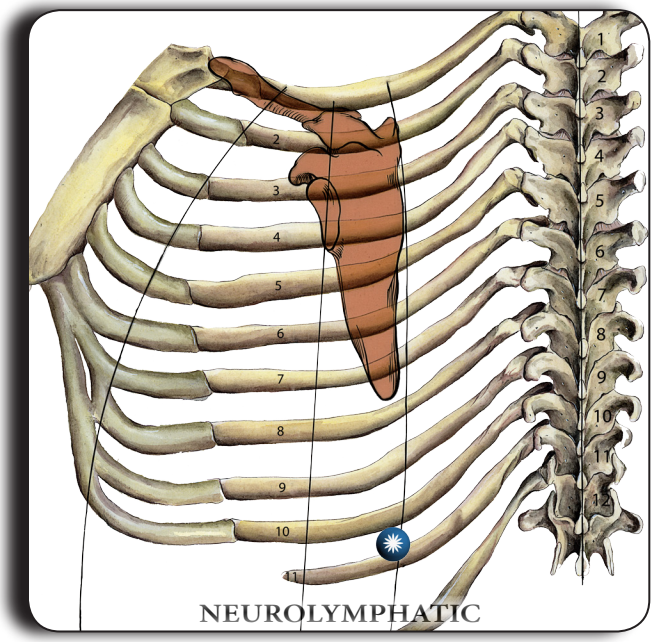

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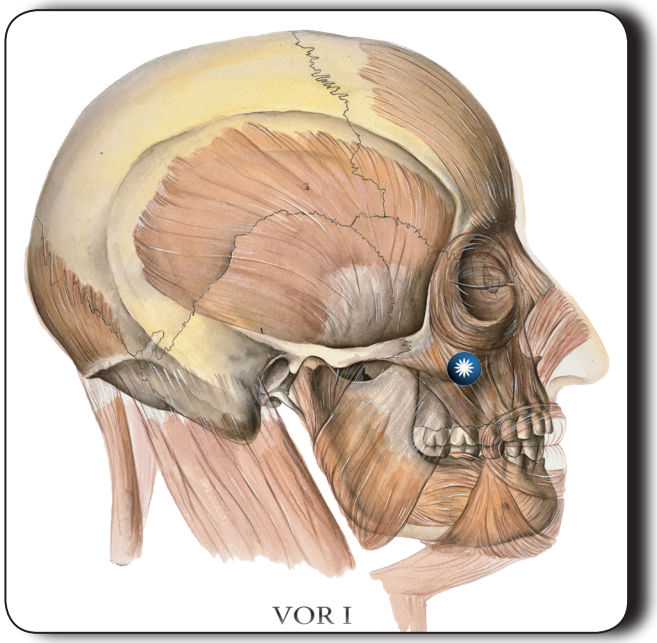
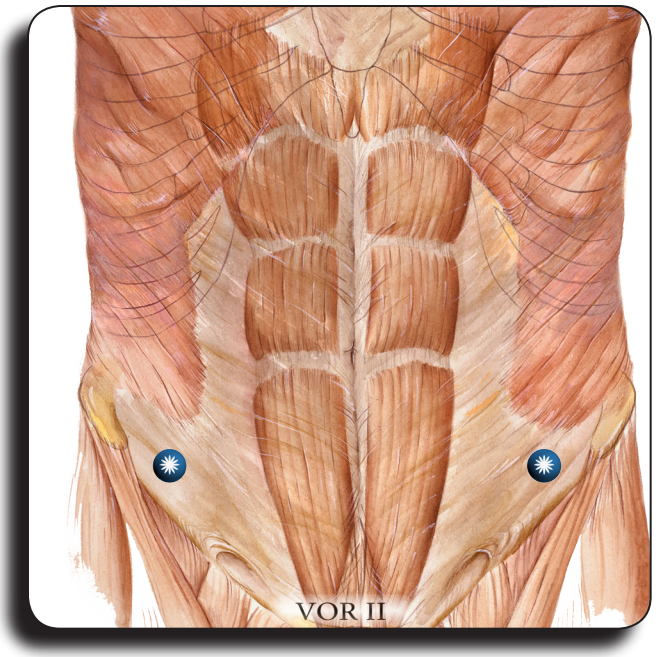
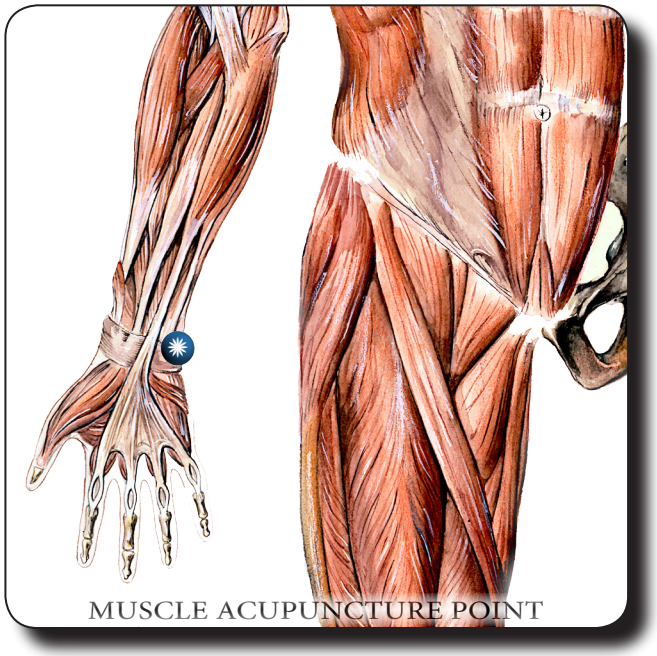


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 538: OPPONENS POLLICIS, (Flexor Division)

ORIGIN: Transverse carpal ligament.

INSERTION: Radial side of entire length of 1st metacarpal.

ACTION: From its neutral position, it abducts, flexes and rotates the 1st metacarpal.

TEST:

Patient: Supine. Supinate forearm on arm. Put thumb in neutral position. Flex 1st metacarpal toward base of 5th metacarpal. 1st and 2nd phalanges are not involved with this muscle test.

Doctor: Position: Ipsilateral.
Brace: Dorsum of hand near 2nd metacarpal.
Contact: Distal palmar surface of 1st metacarpal to extend thumb through coronal plane.

NEUROVASCULAR: (Lat) Temporal bone, mastoid process, tip of anterior aspect.

NEUROLYMPHATIC: (Post/L) 10th ICS, at vertebral border of scapula.

VISCERAL ORGAN:

I. *Posterior Pituitary:* (Lat/BL) Zygomatic bone, lower lateral aspect of eye.

II. *Gonads:* (Ant/BL) Pelvis, anterior aspect, Iliac fossa of Ilium, superior to inguinal ligament, 1" medial to ASIS.

M. A. P. : H5.5

V.L. : T5L

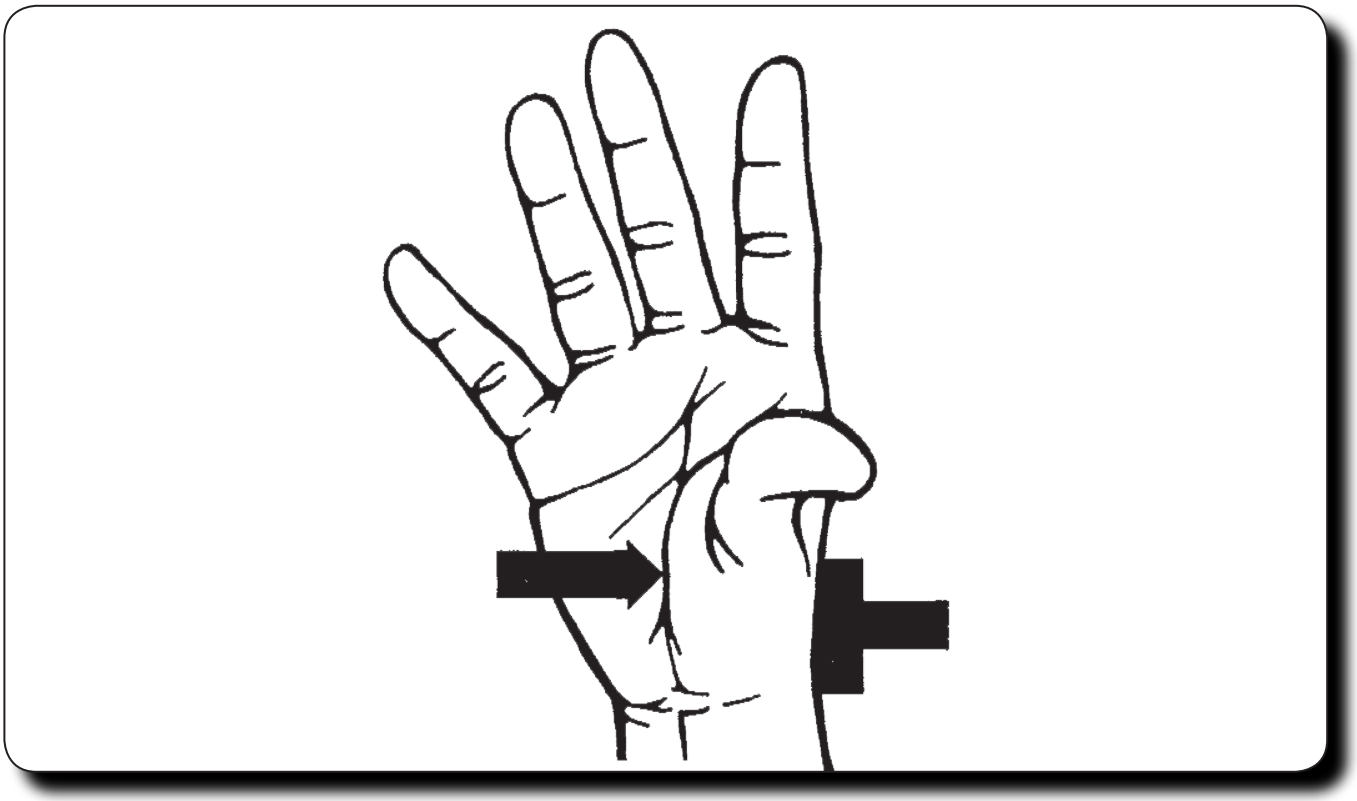
L. B. V.L. : T6L

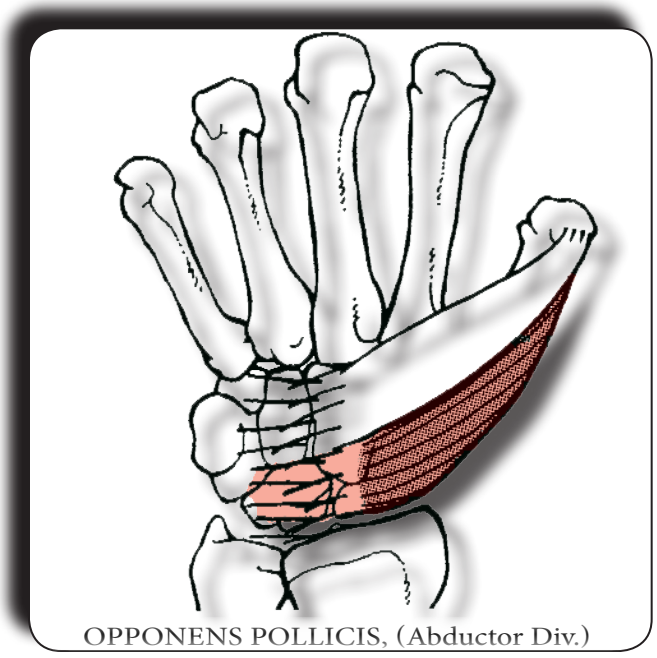
M. M. : C6

CRANIAL: Ethmoid

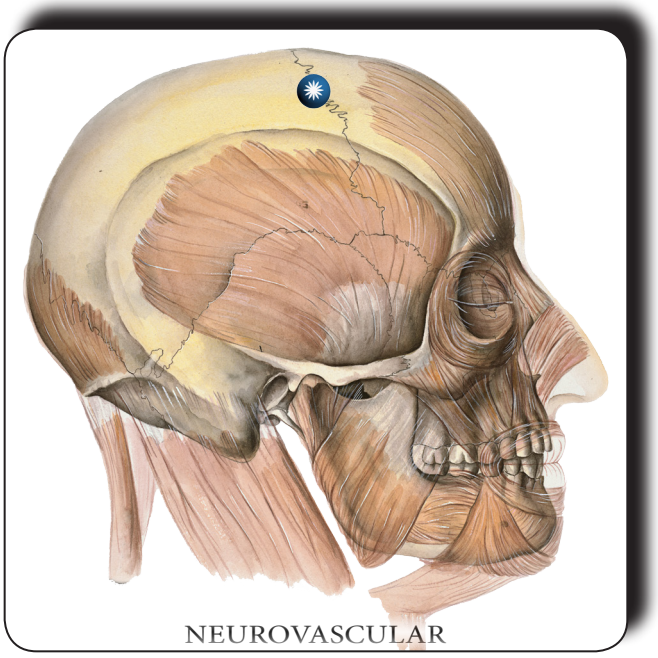
FOOT: 1st Metatarsal

NUTRIENT SOURCE:
1. Inositol (S)

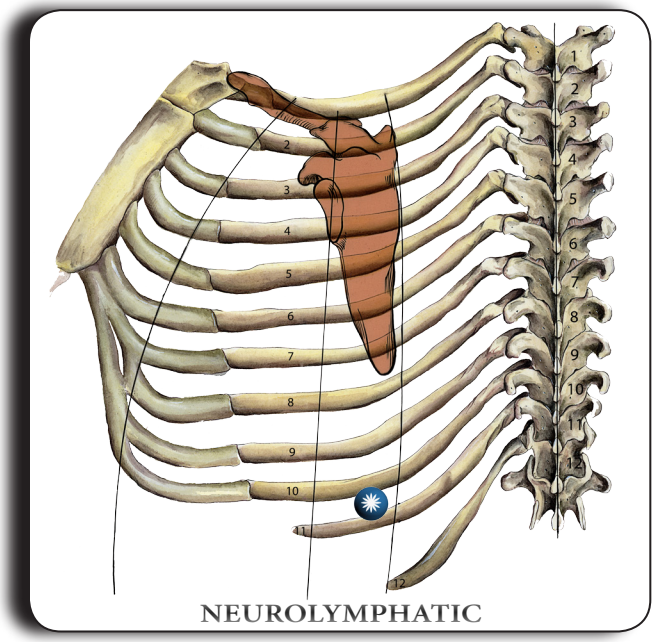




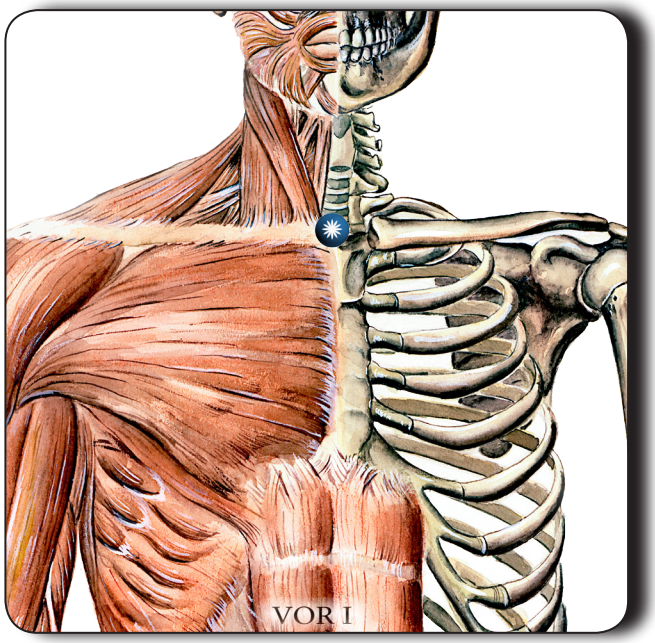
OPPONENS POLLICIS, (Abductor Div.)



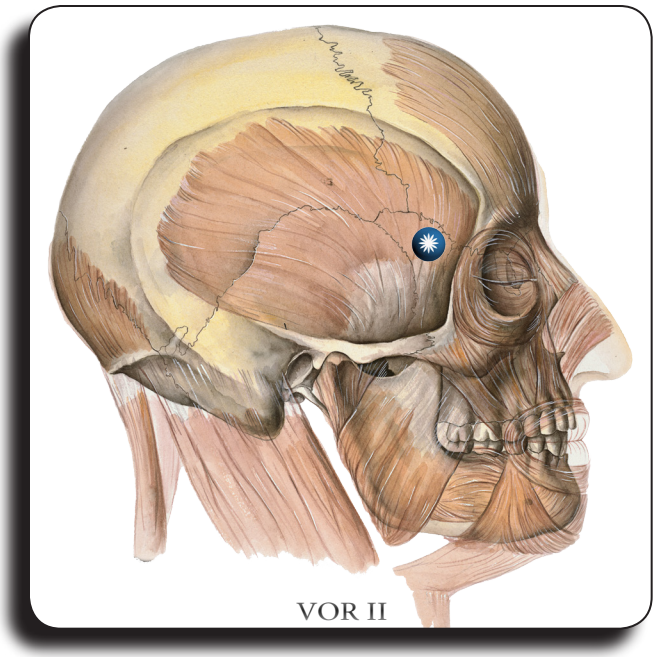
NEUROVASCULAR



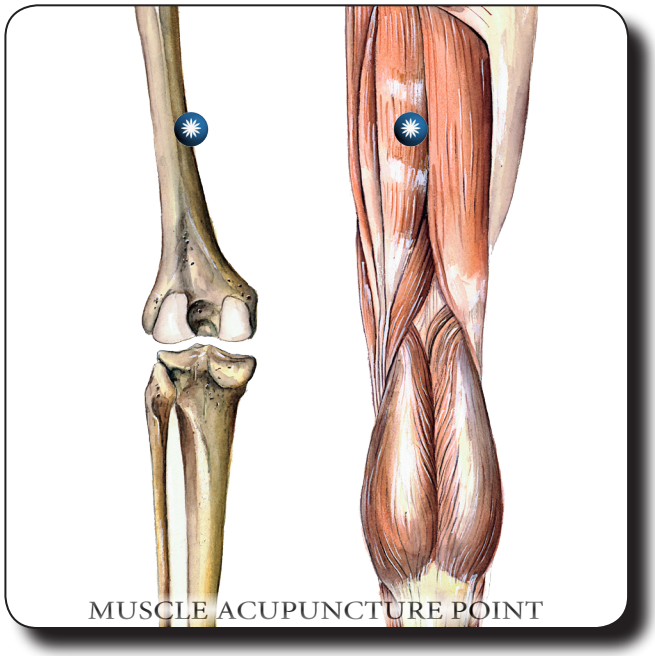
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 540: OPPONENS POLLICIS, (Abductor Division)

ORIGIN: Tubercle of trapezium bone.

INSERTION: Radial side of entire length of 1st metacarpal.

ACTION: From its neutral position, it abducts, flexes and rotates the 1st metacarpal. Some authorities feel the abduction quality is more adduction.

TEST:

Patient: Supine. Supinate forearm on arm. Put thumb in neutral position. Abduct 1st metacarpal toward Pisiform. 1st and 2nd phalanges are not involved in this muscle test.

Doctor: Position: Ipsilateral.
Brace: Dorsum of hand near 2nd metacarpal.
Contact: Distal palmar surface of 1st metacarpal to adduct thumb through an oblique plane.

NEUROVASCULAR: (Lat) Cranium, lateral aspect, coronal suture, halfway between superior temporal line and sagittal suture.

NEUROLYMPHATIC: (Lat/L) 10th ICS, midaxillary area.

VISCERAL ORGAN:

I. *Pharynx:* (Ant/Midline) Sternum, Cv22 at sternal notch.

II. *Pineal Gland:* (Lat/BL) Sphenoid, greater wing, just above eyes.

M. A. P. : B50.75

V.L. : T9R

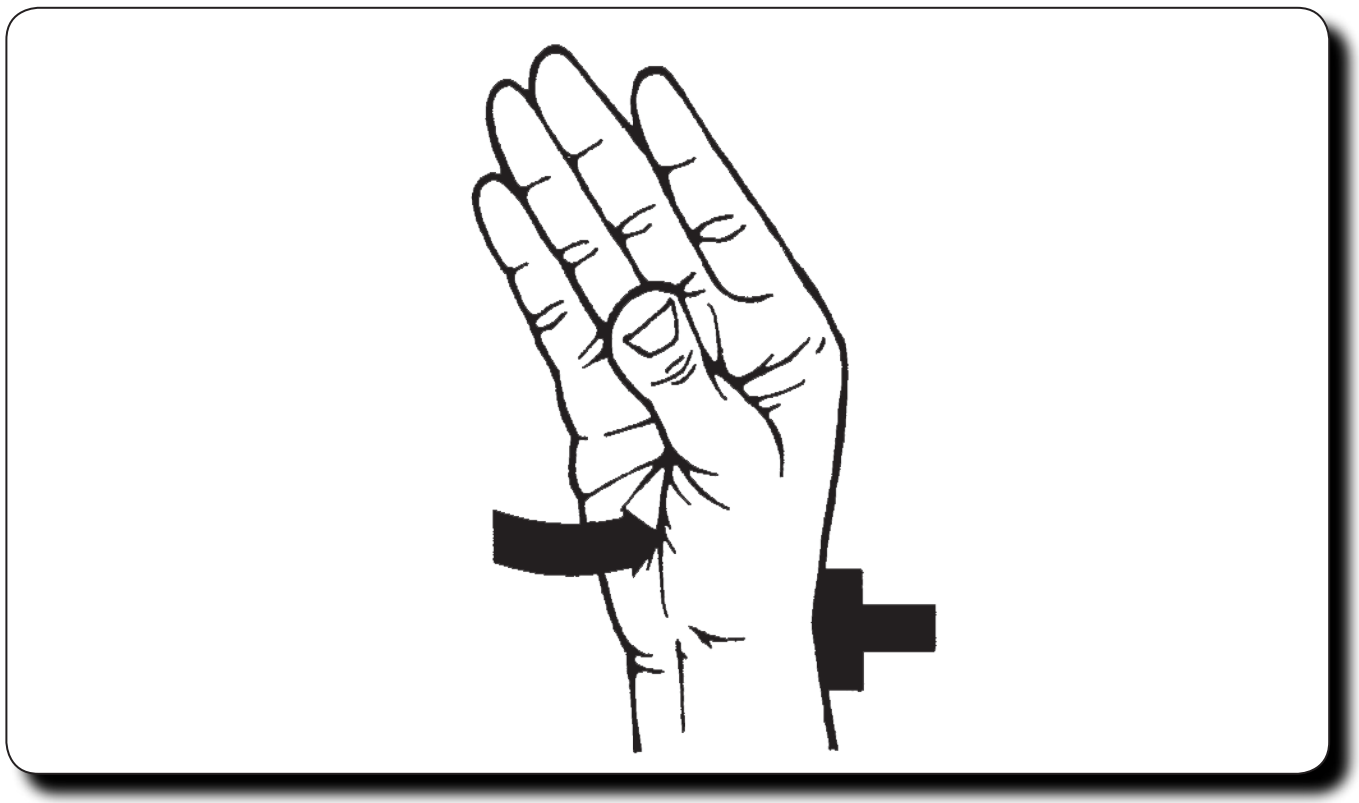
L. B. V.L. : T2R

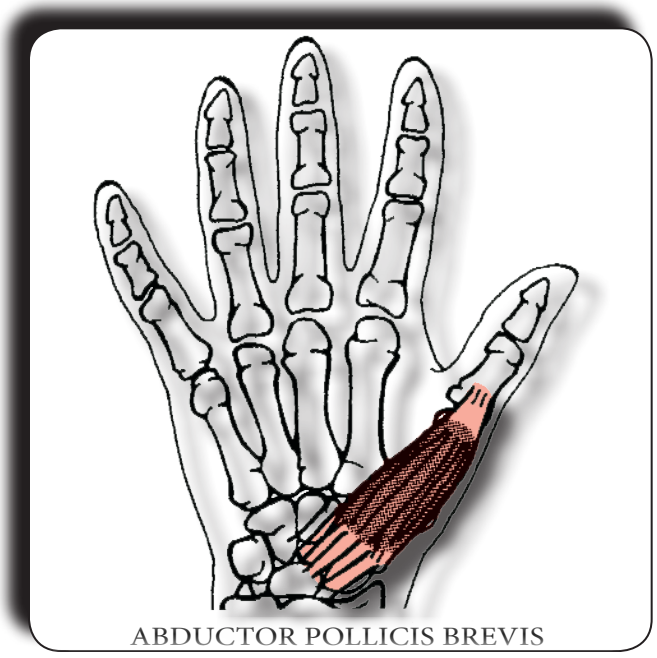
M. M. : C6

CRANIAL: Occiput

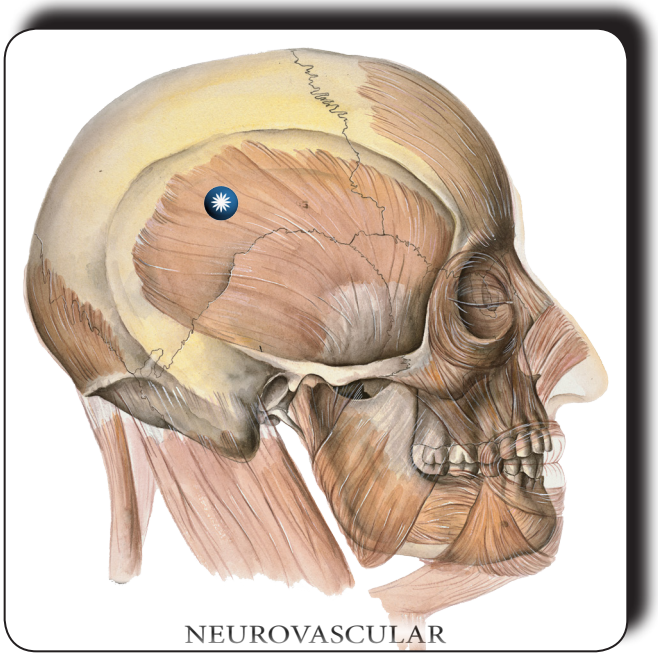
FOOT: Calcaneus

NUTRIENT SOURCE:
1. Biodent (S)
2. Cal Phos-Homeopathic 6x (HP)

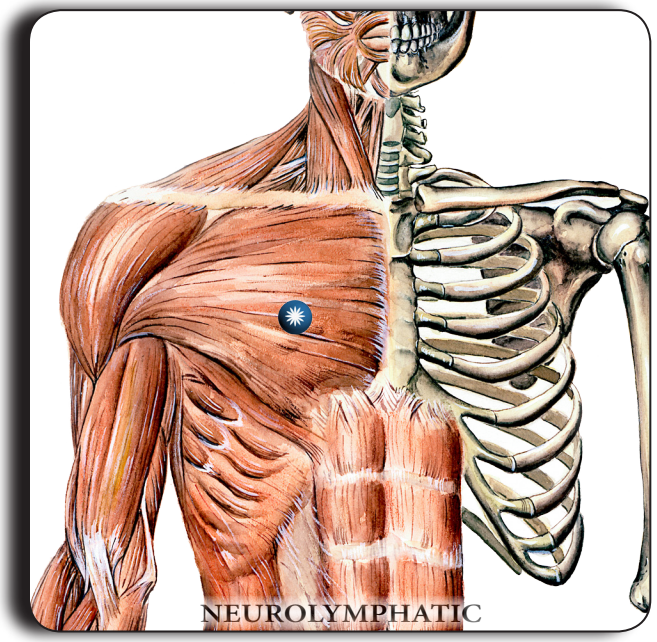




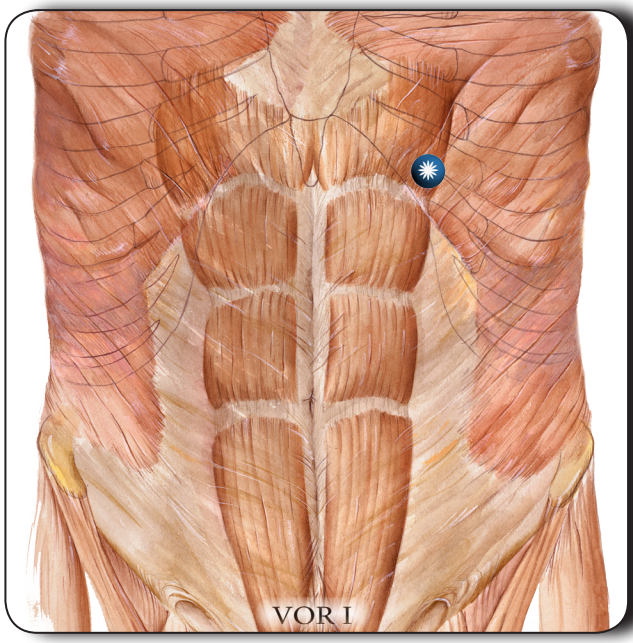
ABDUCTOR POLLICIS BREVIS



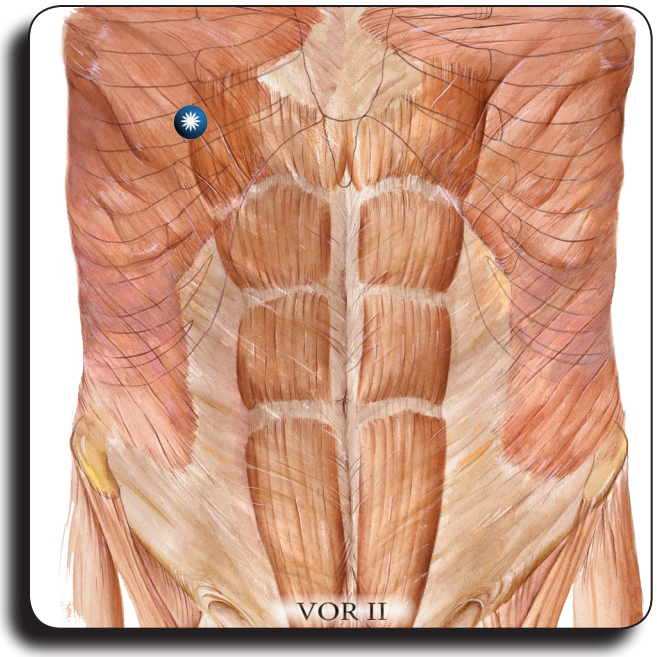
NEUROVASCULAR



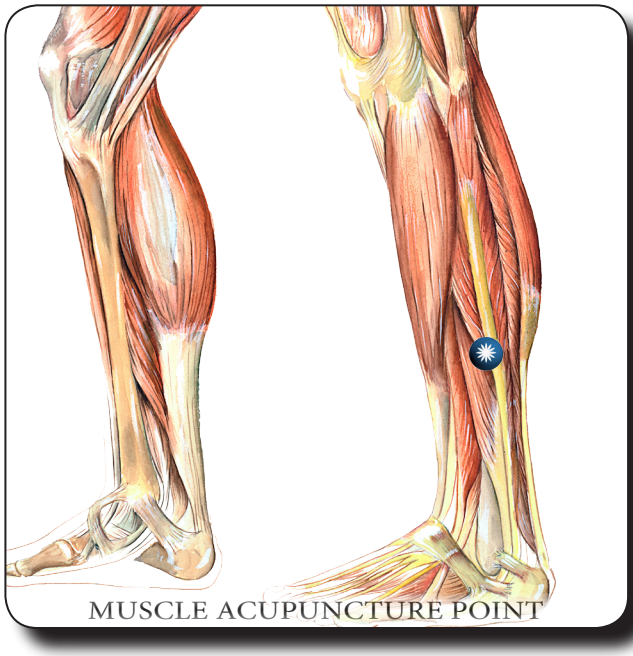
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 542 ABDUCTOR POLLICIS BREVIS

ORIGIN: Transverse carpal ligament tuberosity of the scaphoid and the ridge of the trapezium.

INSERTION: Radial side of the base of the proximal phalanx of the thumb. Its lateral fibers insert into the capsule of the metacarpophalangeal articulation.

ACTION: With hand in supinated position, abducts the proximal phalanx obliquely toward the middle of the wrist and rotates it medially.

TEST:

Patient: Supinate hand and draw the proximal phalanx obliquely. Keep proximal and distal phalanx in neutral position but slightly extended.

Doctor: Position: Ipsilateral.
Brace: Dorsal surface of 1st metacarpal.
Contact: Palmar aspect of proximal phalanx to adduct through an oblique plane.

NEUROVASCULAR: (Lat) Parietal bone, lateral aspect, anterior and inferior to parietal eminence.

NEUROLYMPHATIC: (Ant/R) 3rd ICS, 2" lateral to sternum.

VISCERAL ORGAN:

I. *Pancreas - Sugar:* (Ant/L) St18.2, 6th rib, costocartilage junction.

II. *Gallbladder Duct System:* (Ant/R) St18.2, 6th rib, costocartilage junction.

M. A. P. : G35

V.L. : C3R

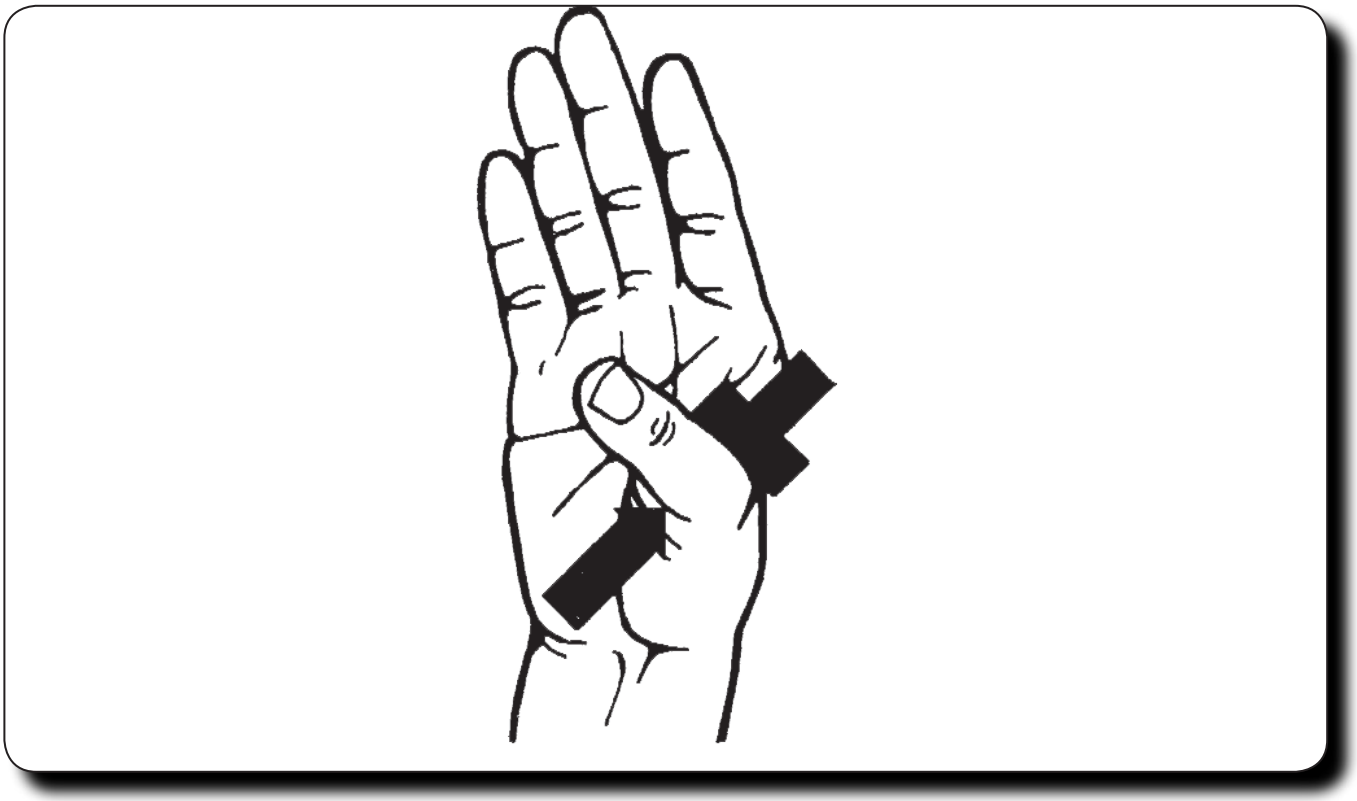
L. B. V.L. : L3R

M. M. : C7

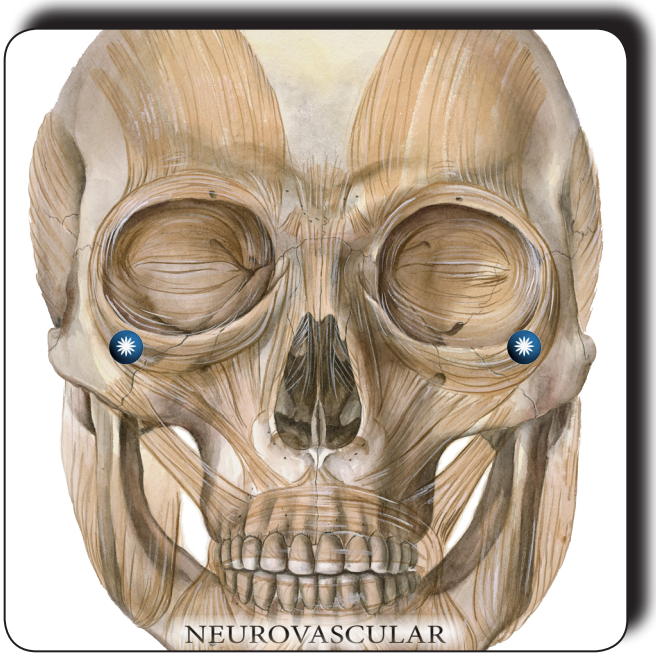
CRANIAL: Parietal

FOOT: Talus

NUTRIENT SOURCE:
1. Chezyn (S)



ADDUCTOR POLLICIS TRANSVERSUS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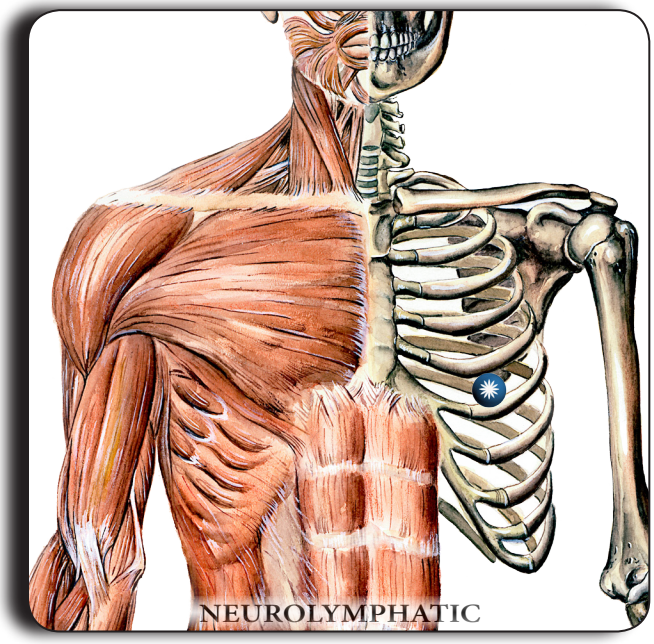
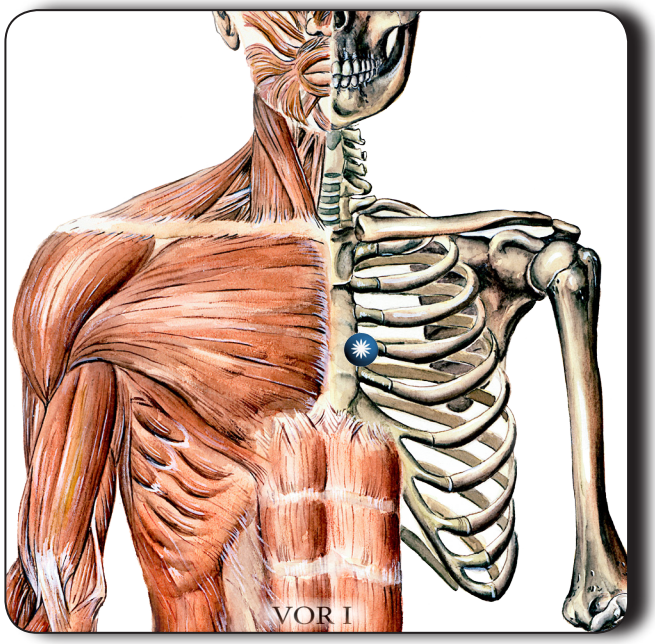
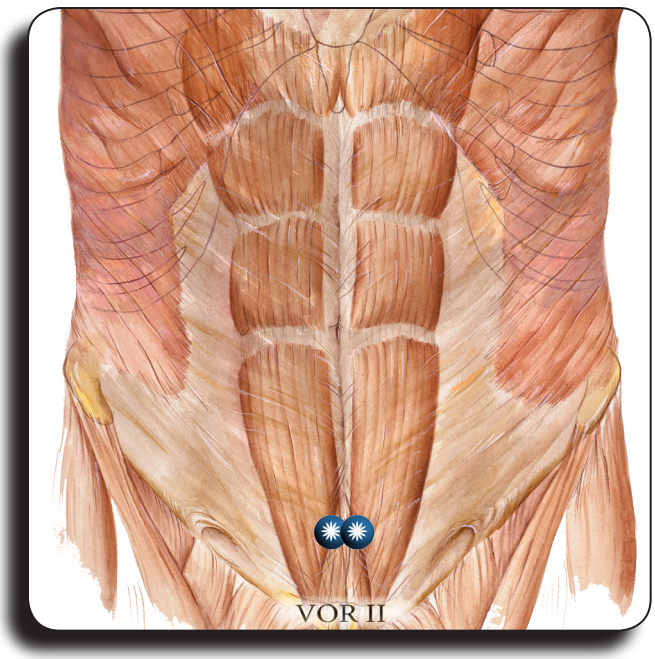
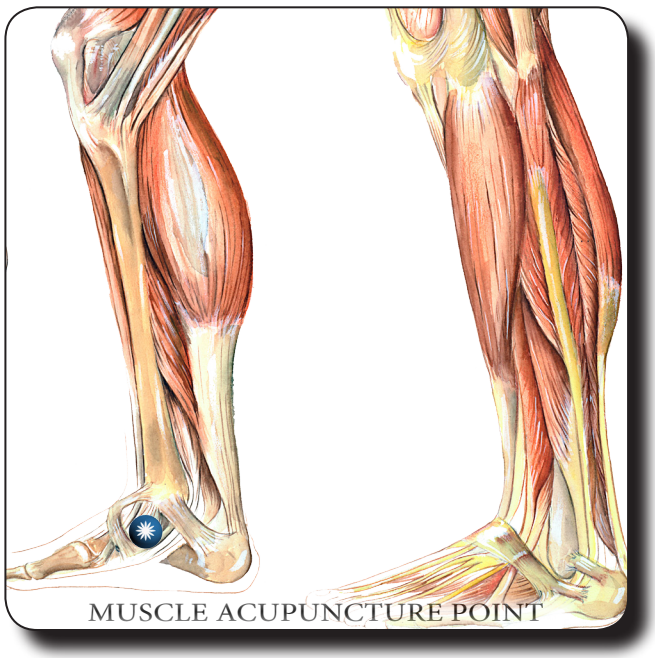

NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 544: ADDUCTOR POLLICIS TRANSVERSUS

ORIGIN: Distal two-thirds of anterior surface of 3rd metacarpal.

INSERTION: Ulnar side of base of proximal phalanx of thumb.

ACTION: Adducts proximal phalanx and 1st metacarpal toward 3rd metacarpal.

TEST:

Patient: Supine. Supinate forearm on arm.
Extend 1st phalanx of thumb.
Adduct thumb toward 3rd metacarpal.

Doctor: Position: Ipsilateral.
Brace: Dorsal surface of hand near index.
Contact: Proximal phalanx of thumb and abduct through oblique plane.

NOTE: Keep thumb close to hand during testing procedure.

NEUROVASCULAR: (Ant/BL) Zygomatic-maxillary suture, inferior and lateral to eye.

NEUROLYMPHATIC: (Ant/L) 5th ICS, near nipple line.

VISCERAL ORGAN:

I. *Heart:* (Ant/L) Sternum at junction of 4th rib.

II. *Ileum:* (Ant/BL) Rectus Abdominis, 1st section, 2-3" superior to pubes on linea alba.

M. A. P. : Sp5

V.L. : T11R

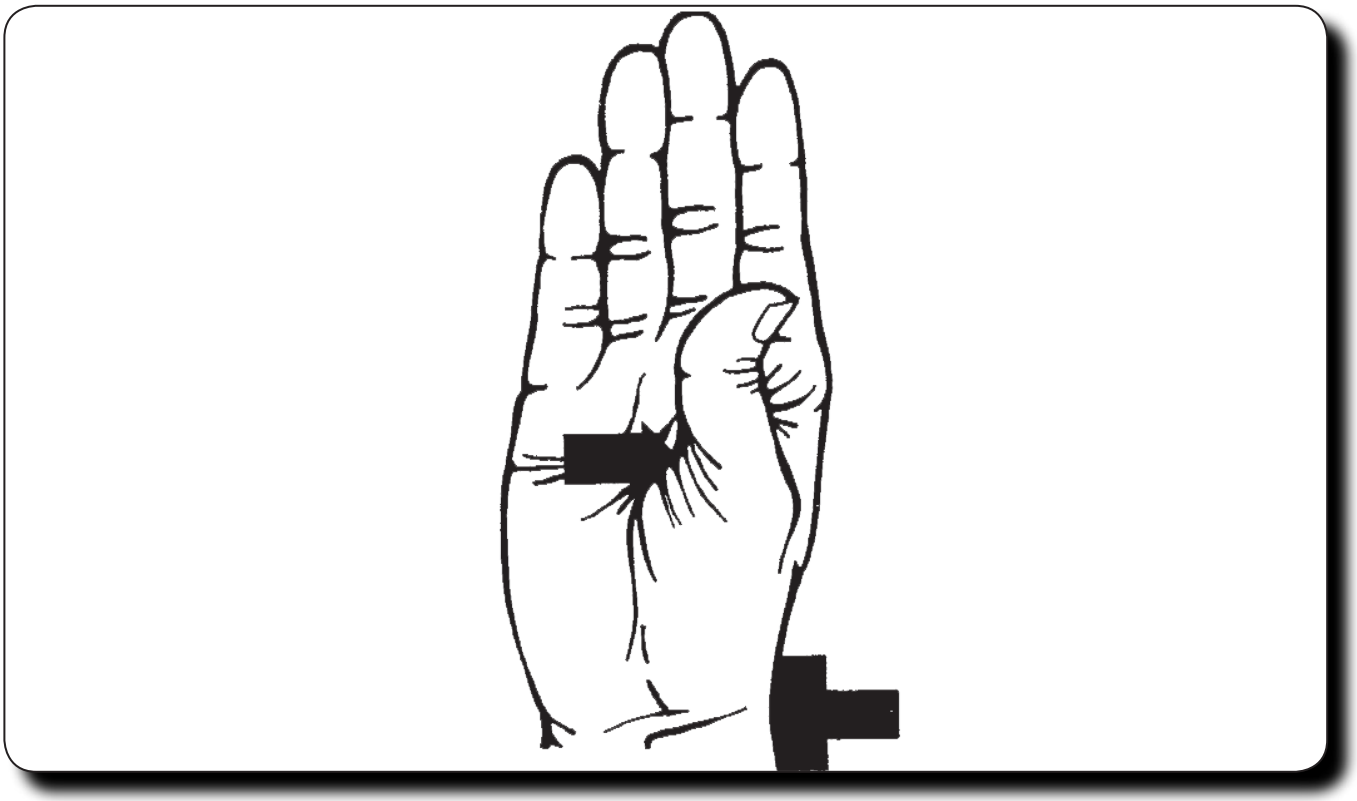
L. B. V.L. : C7R

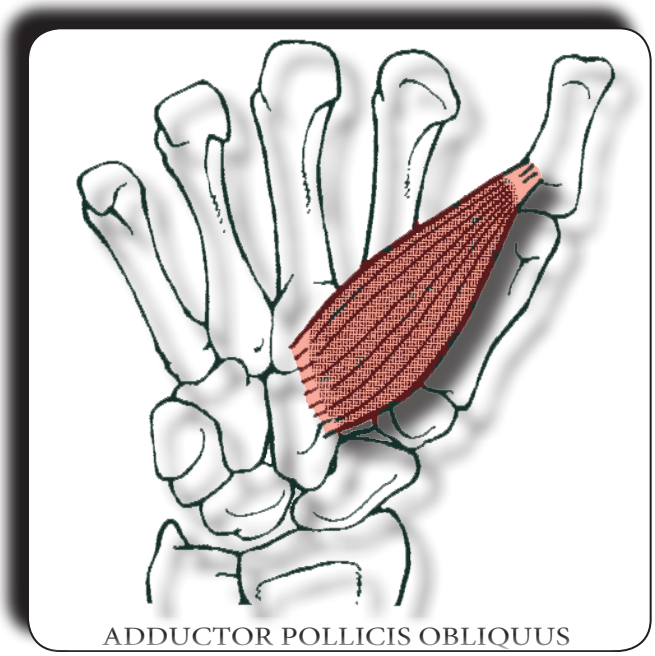
M. M. : T1

CRANIAL: Ethmoid

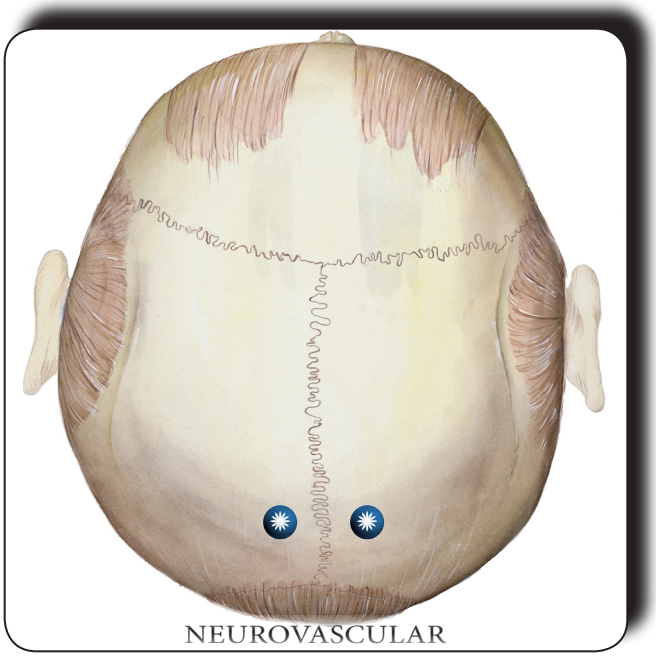
FOOT: 1st Cuneiform

NUTRIENT SOURCE:
1. R.N.A. (S)

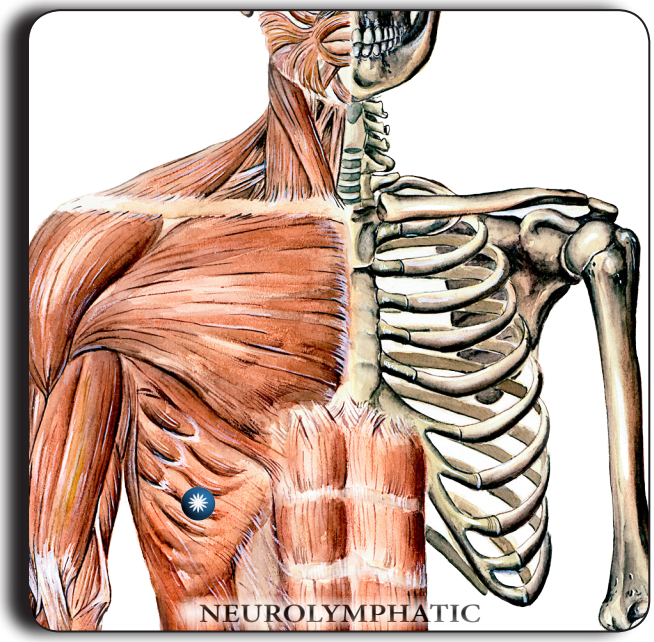




ADDUCTOR POLLICIS OBLIQUUS



NEUROVASCULAR



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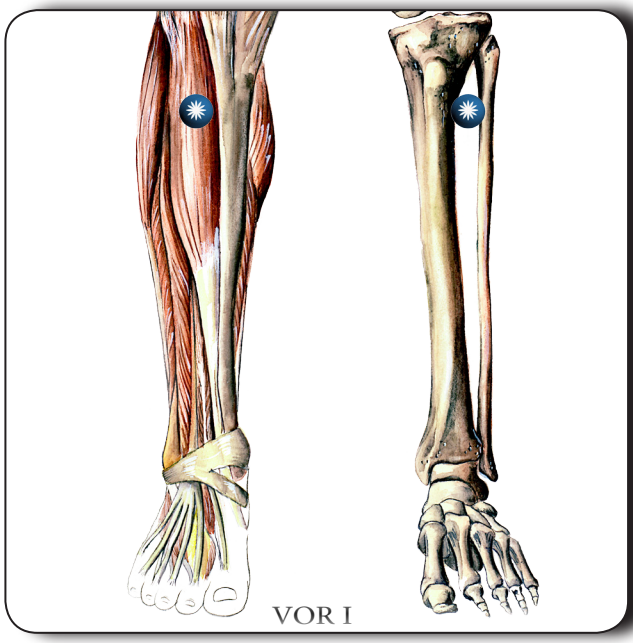
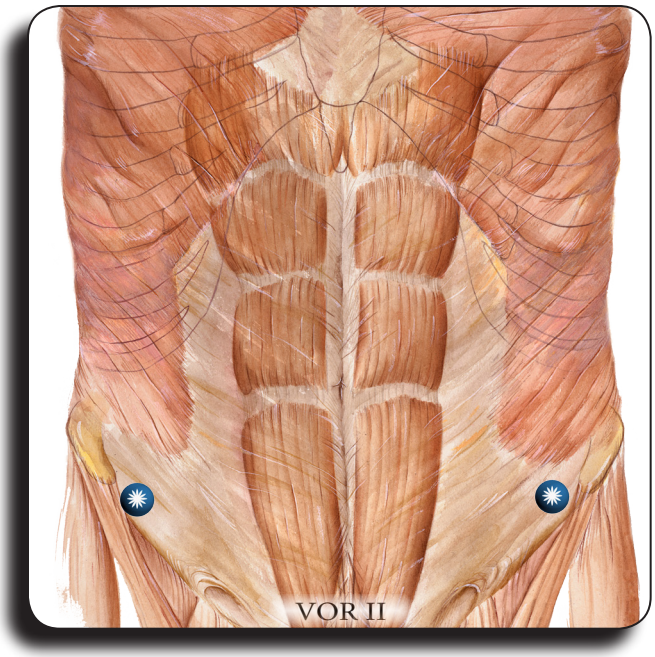
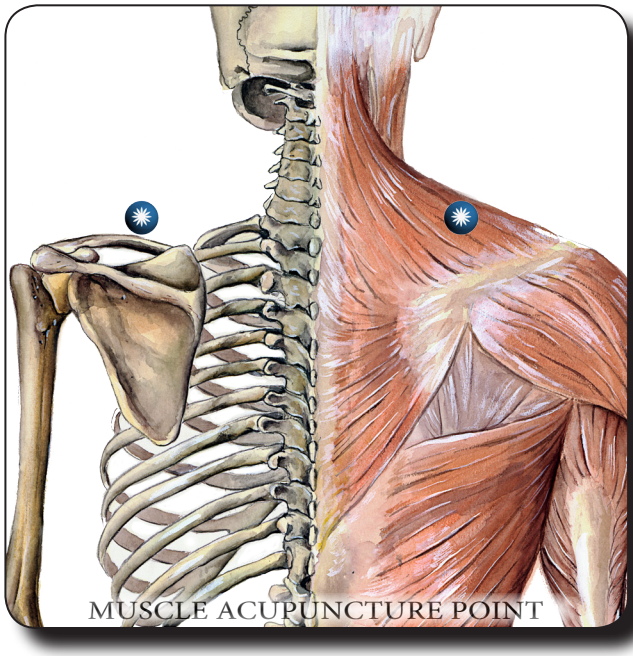


VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 546: ADDUCTOR POLLICIS OBLIQUUS

ORIGIN: Capitate bone, base of the 2nd and 3rd metacarpals, intercarpal ligament and the sheath of the tendon of Flexor Carpi Radialis.

INSERTION: Ulnar side of the base of the 1st phalanx of the thumb.

ACTION: Aids in adduction of thumb while supporting the motion of opposition.

TEST:

Patient: Extend distal phalanx of thumb. Draw the thumb to a position one half inch (23 degrees) from palmar surface of fingers and adduct thumb.

Doctor: Position: Ipsilateral.
Brace: Dorsal surface of hand.
Contact: Proximal phalanx of thumb and abduct through coronal plane.

NEUROVASCULAR: (Sup/BL) Parietal bone, superior aspect, 1" lateral to sagittal suture and 2" anterior to posterior fontanelle.

NEUROLYMPHATIC: (Ant/R) 7th ICS, 1" lateral to costocartilage junction.

VISCERAL ORGAN:

I. *Anterior Pituitary:* (Ant/BL) Anterior aspect of calf, St36.3.

II. *Lymphatics - Colon:* (Ant/BL) Abdomen, just superior to inguinal ligament and medial to origin of Sartorius muscle.

M. A. P. : Tw15

V.L. : C6 R

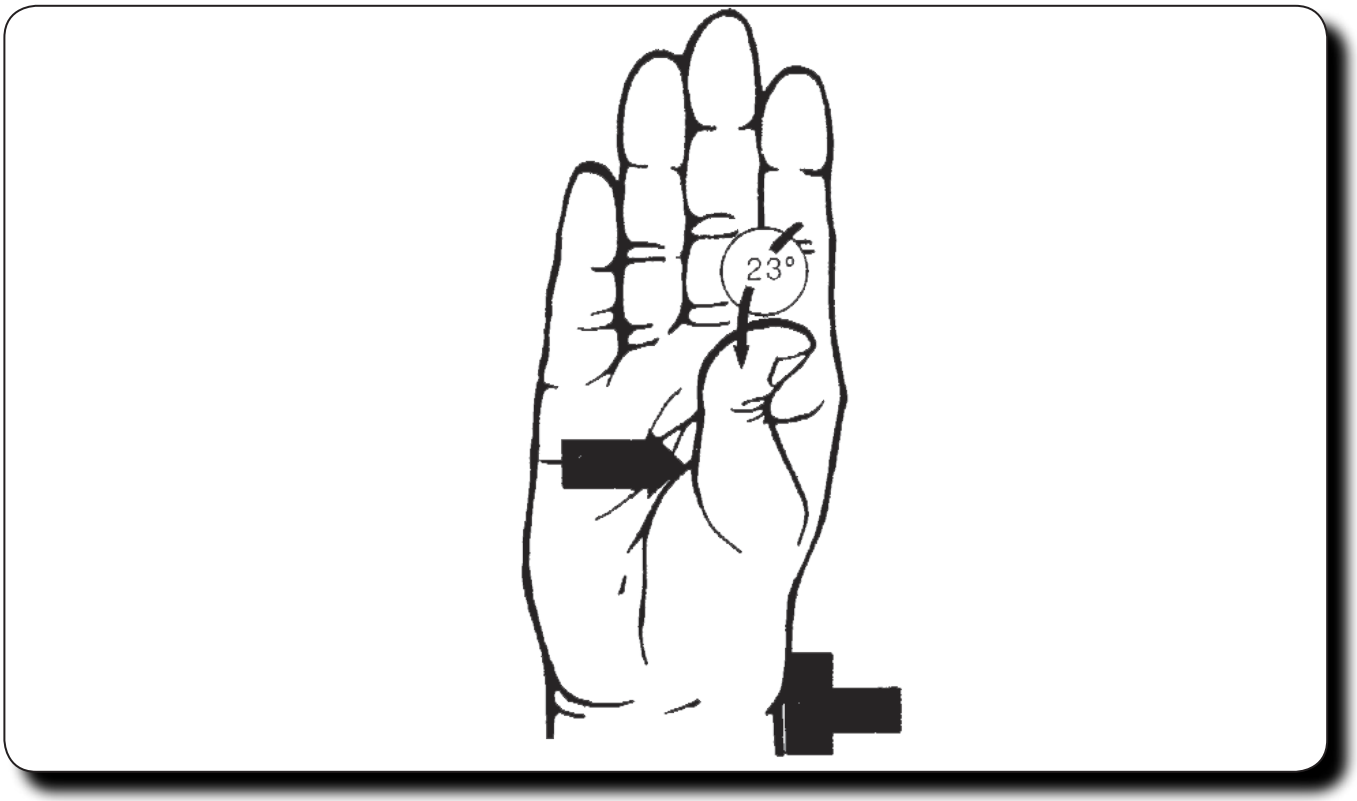
L. B. V.L. : T12R

M. M. : C8

CRANIAL: Zygoma

FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. Niacinamide B6 (S)



Muscles Of The Hand That Insert On The Fingers

Origin: Forearm
(Extensors)

1. 548 Extensor Digitorum Communis Manus, Medial Division
2. 550 Extensor Digitorum Communis Manus, Lateral Division
3. 552 Extensor Digitorum Minimi Manus
4. 554 Extensor Indicis Proprius

(Flexors)

5. 556 Flexor Digitorum Superficialis, Medial Division
6. 558 Flexor Digitorum Superficialis, Lateral Division
7. 560 Flexor Digitorum Profundus Manus, Medial Division
8. 562 Flexor Digitorum Profundus Manus, Lateral Division

Origin: Hand
(Extensors)

1. 564 Interossei Dorsales Manus, Fourth Division
2. 566 Interossei Dorsales Manus, Third Division
3. 568 Interossei Dorsales Manus, Second Division
4. 570 Interossei Dorsales Manus, First Division

(Flexors And Abductors)

5. 572 Lumbricales Manus, Fourth Division
6. 574 Lumbricales Manus, Third Division
7. 576 Lumbricales Manus, Second Division
8. 578 Lumbricales Manus, First Division
9. 580 Flexor Digiti Minimi Brevis Manus
10. 582 Abductor Digiti Minimi Manus, Flexor Division
11. 584 Abductor Digiti Minimi Manus, Abductor Division
12. 586 Opponens Digiti Minimi Manus, Abductor Division
13. 588 Opponens Digiti Minimi Manus, Flexor Division

(Flexors And Adductors)

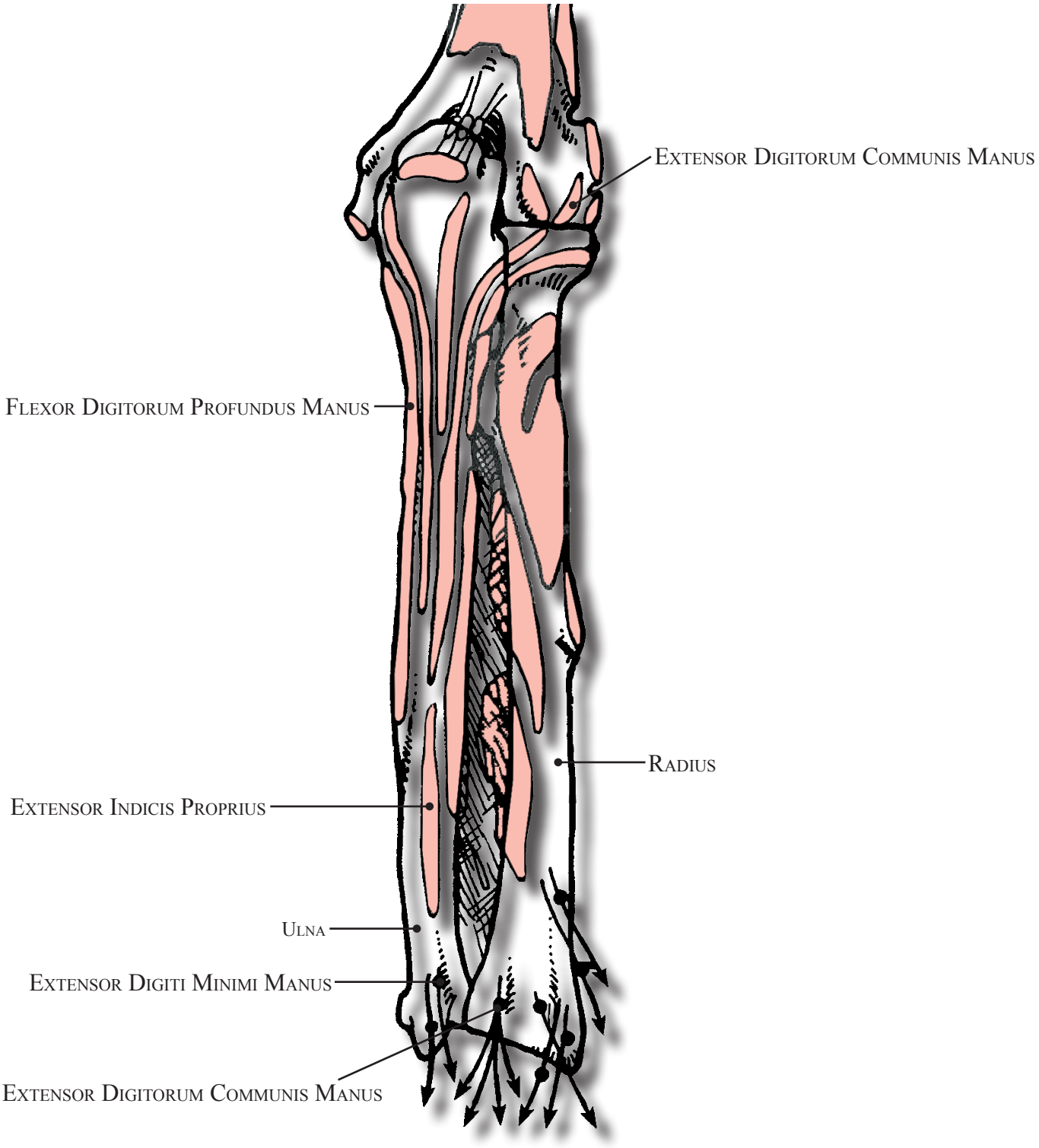
14. 590 Interossei Palmares, Fourth Division
15. 592 Interossei Palmares, Third Division
16. 594 Interossei Palmares, Second Division

Origin: Hand

1. 596 Palmaris Brevis

Origin and Insertion

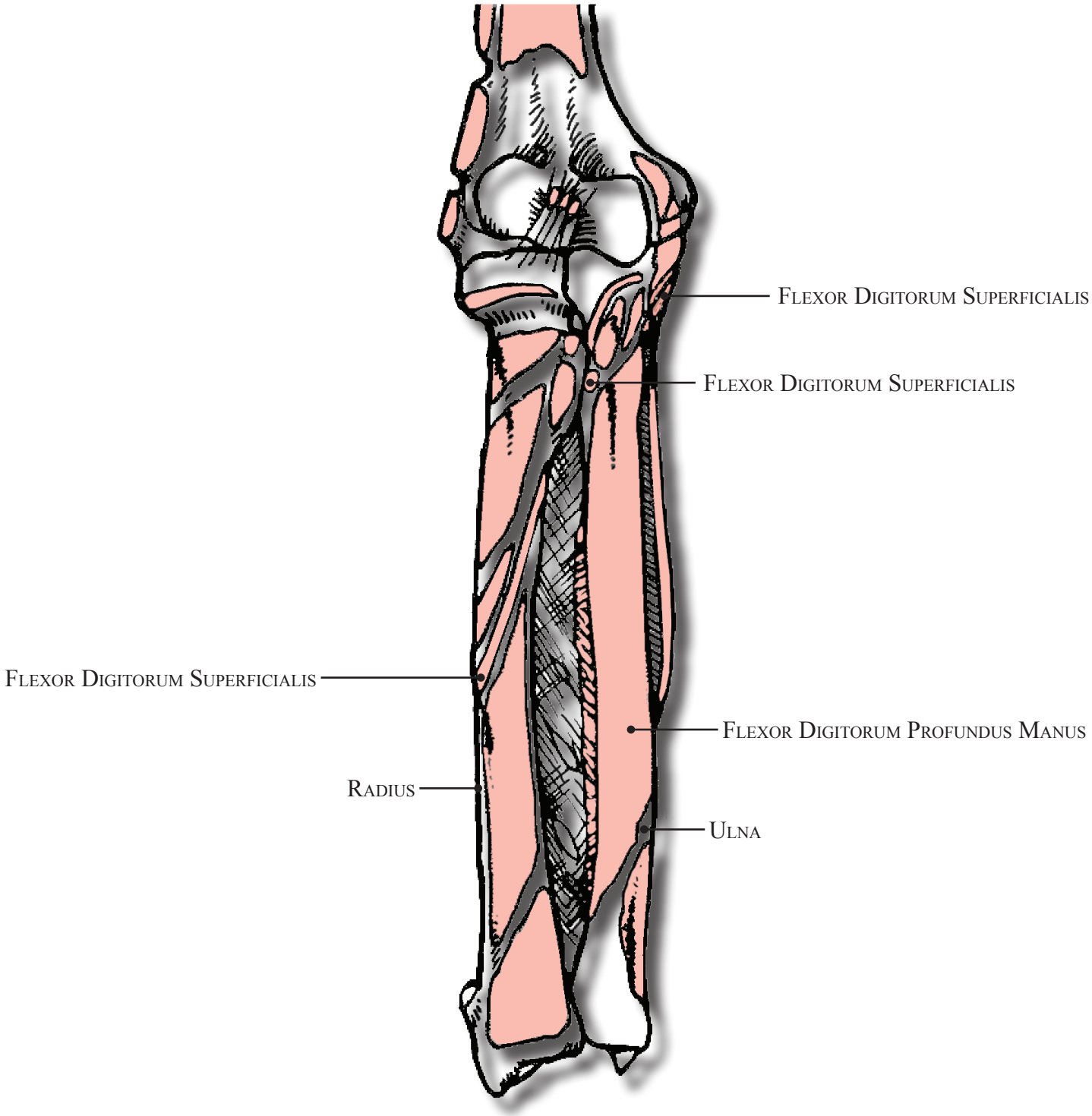
Finger Muscles



Posterior View of Right Forearm

Origin and Insertion

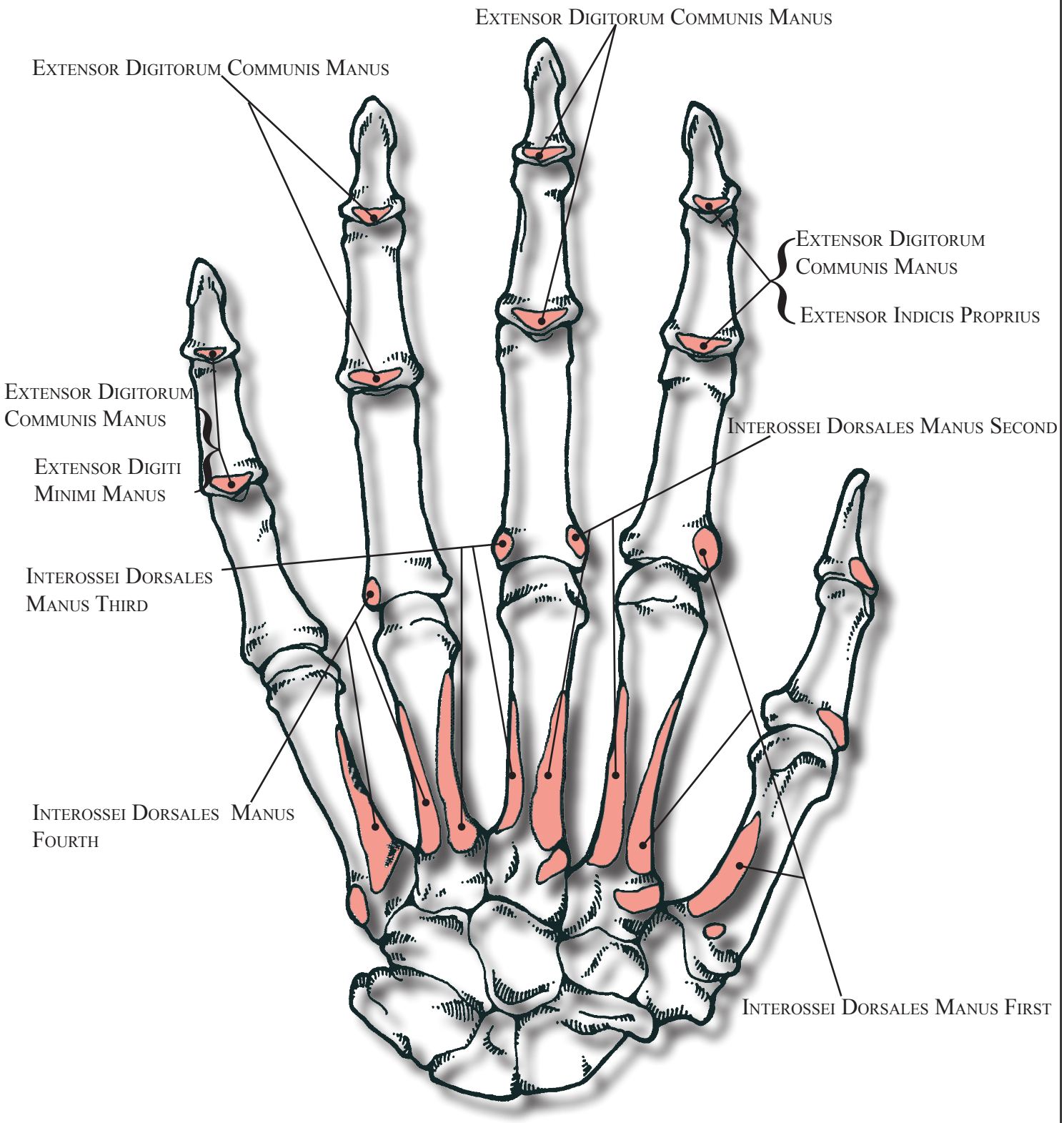
Finger Muscles



Anterior View of Right Forearm

Origin and Insertion

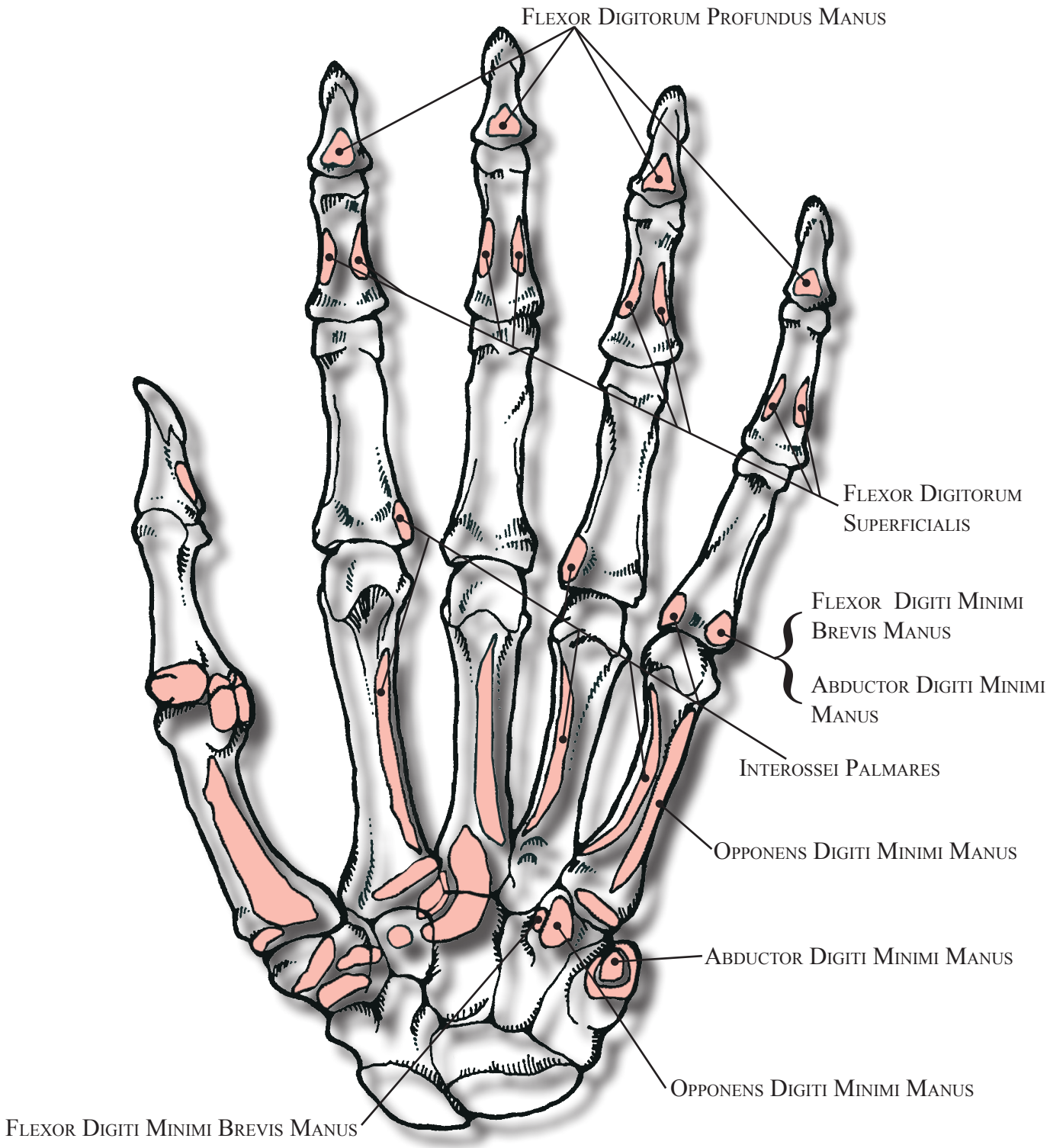
Finger Muscles



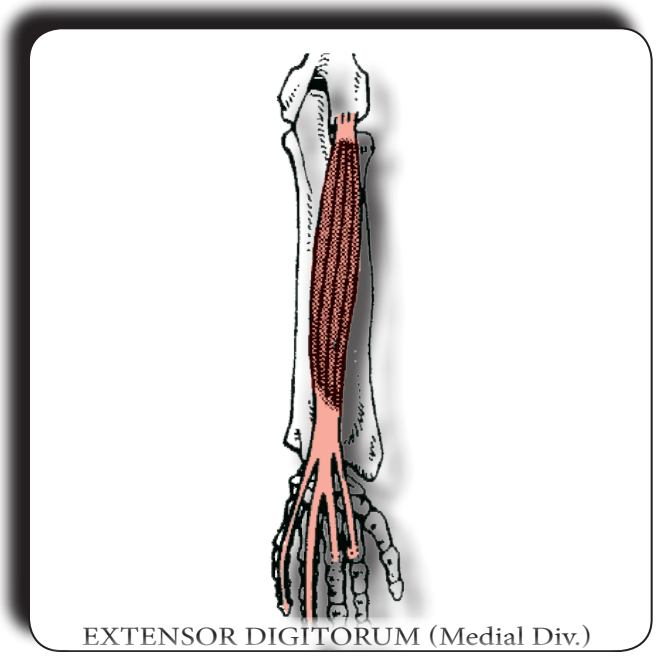
Dorsal View of Left Hand

Origin and Insertion

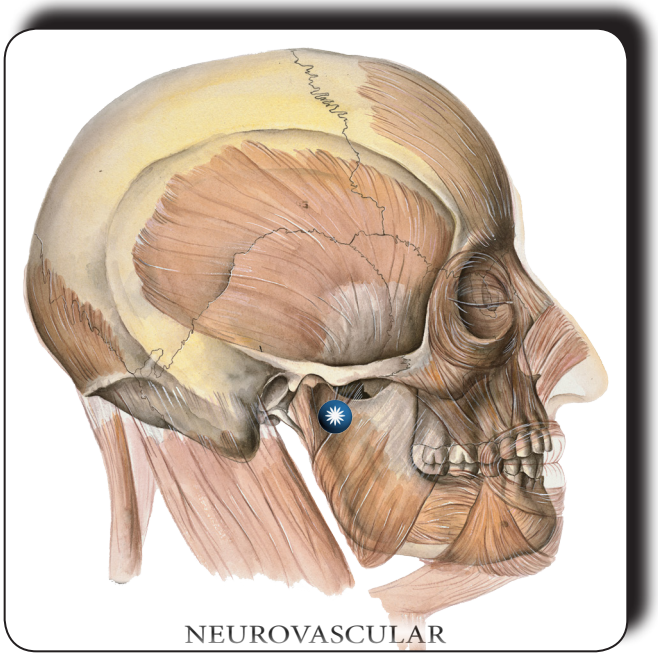
Finger Muscles



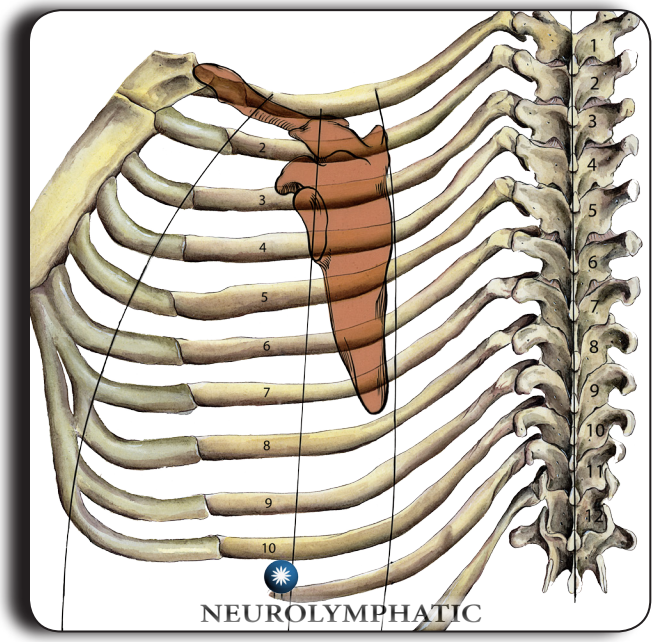
Palmar View of Left Hand



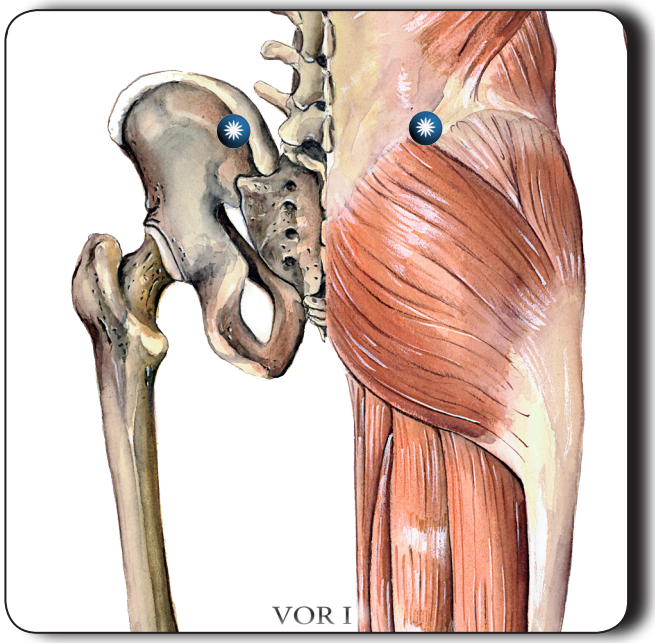
EXTENSOR DIGITORUM (Medial Div.)



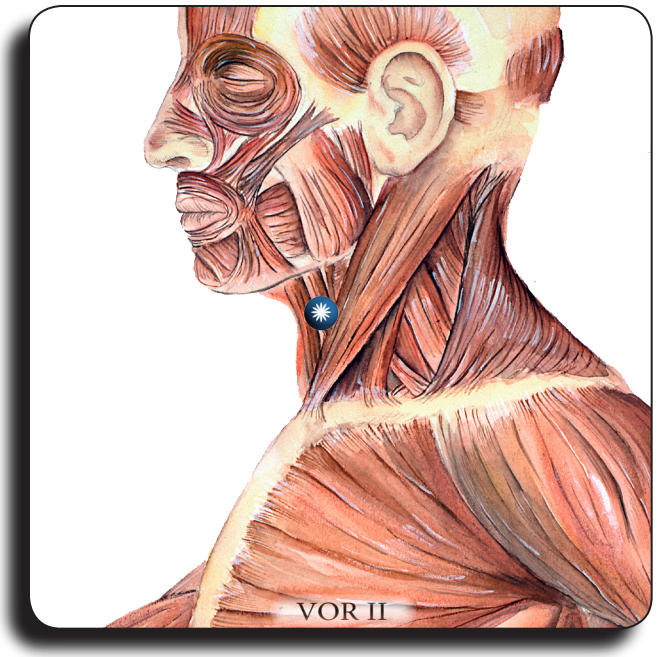
NEUROVASCULAR



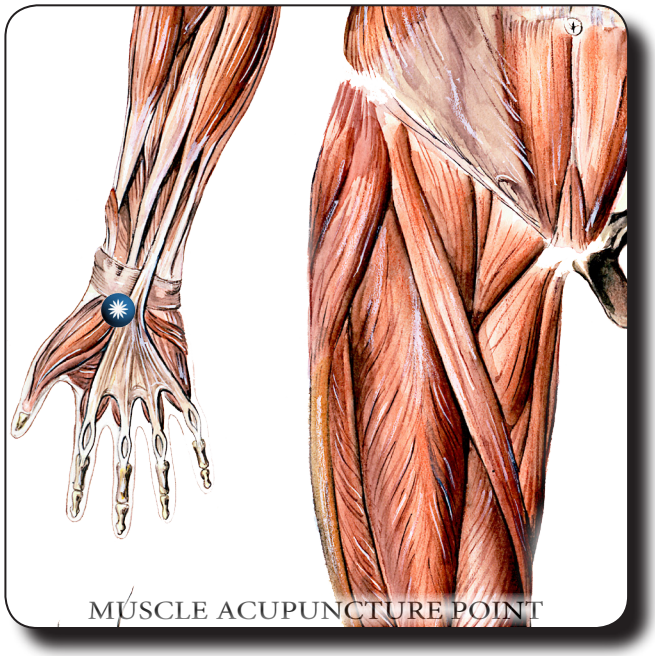
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 548: EXTENSOR DIGITORUM COMMUNIS MANUS, (Medial Division)

ORIGIN: Lateral epicondyle of humerus, intramuscular septum, antebrachial fascia.

INSERTION: Middle and distal phalanges of ring and little finger.

ACTION: Extends the phalanges through midline plane of hand.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Extend ring and little finger. Keep fingers in midline plane of hand

Doctor: Position: Ipsilateral.
Brace: Palmer aspect of hand at base of ring and little finger.
Contact: Dorsal surface of above fingers to flex through sagittal plane.

NEUROVASCULAR: (Lat) Mandible, inferior and anterior to condyle.

NEUROLYMPHATIC: (Post/L) 10th ICS, at tip of 11th rib.

VISCERAL ORGAN:

I. *Ductus Deferens:* (Post/BL) Pelvis, posterior aspect, crest of ilium just lateral to origin of Gluteus Maximus.

II. *Pharynx:* (Ant/BL) Neck, anterior aspect, St9.5, inferior and lateral to thyroid cartilage.

M. A. P. : Cx7.2

V.L. : T6L

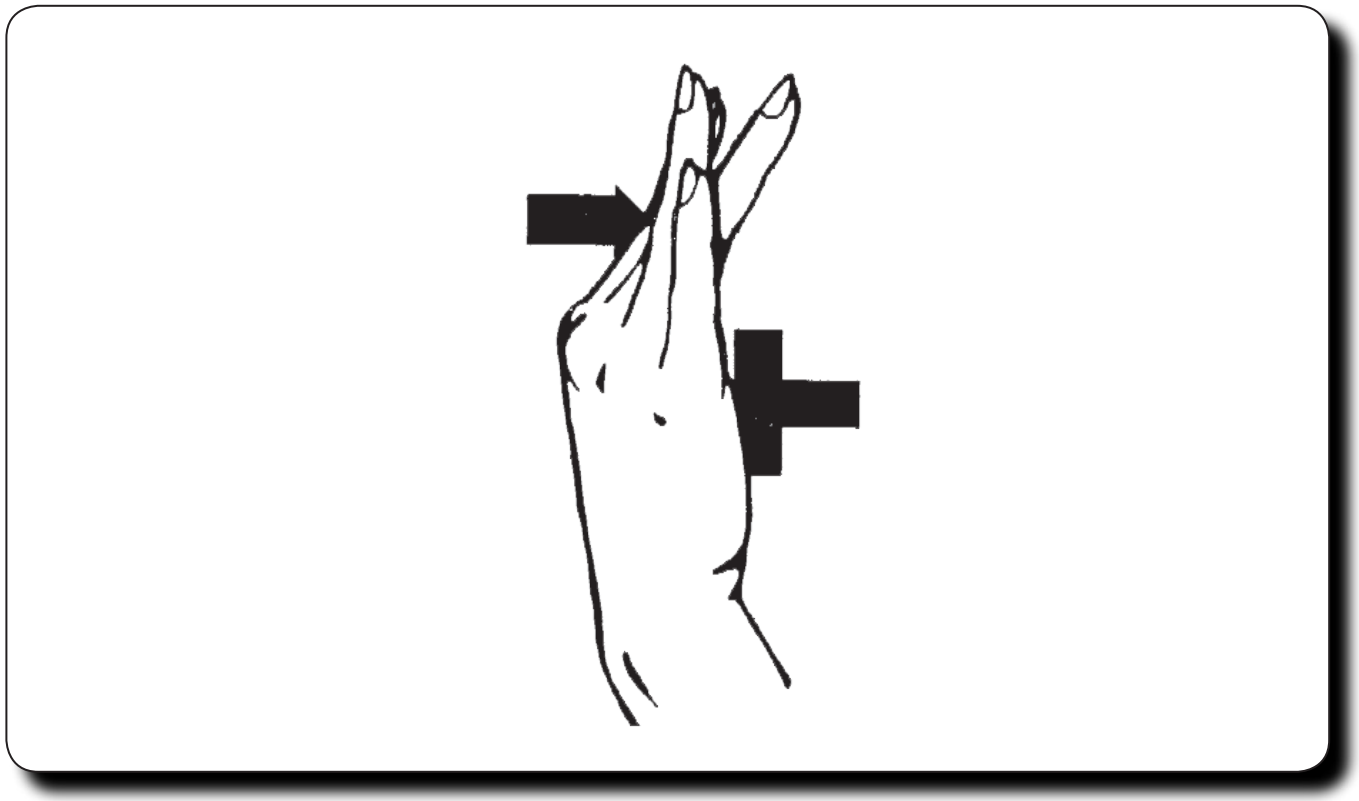
L. B. V.L. : T5L

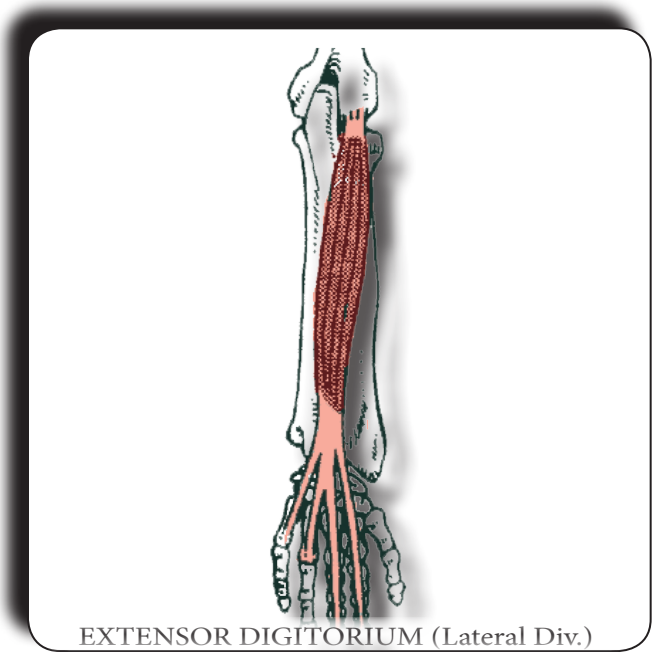
M. M. : C7

CRANIAL: Zygoma

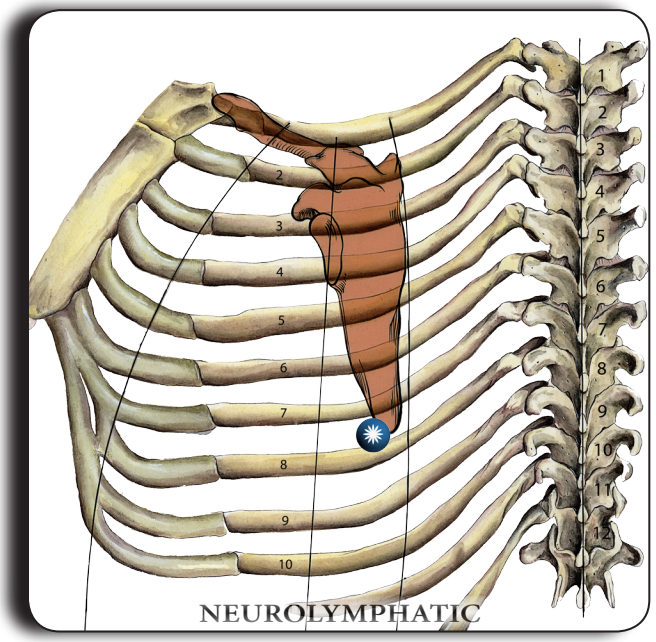
FOOT: 4th Metatarsal

NUTRIENT SOURCE:
1. B6 with Niacinamide (S)

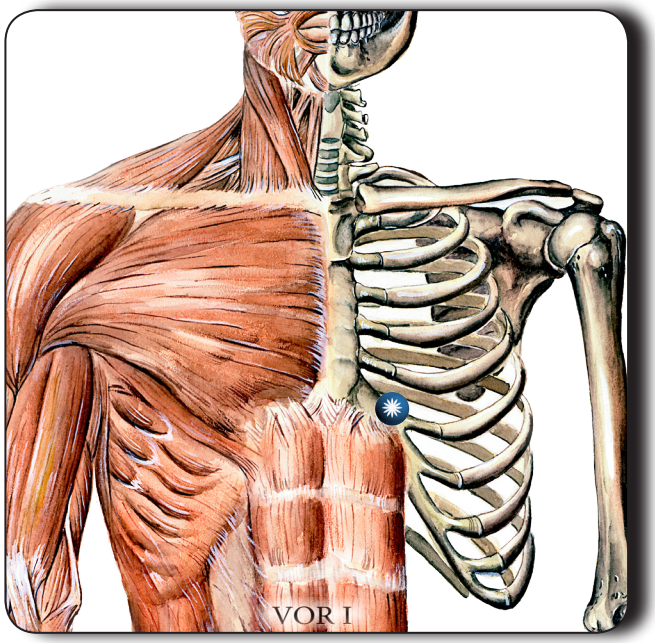


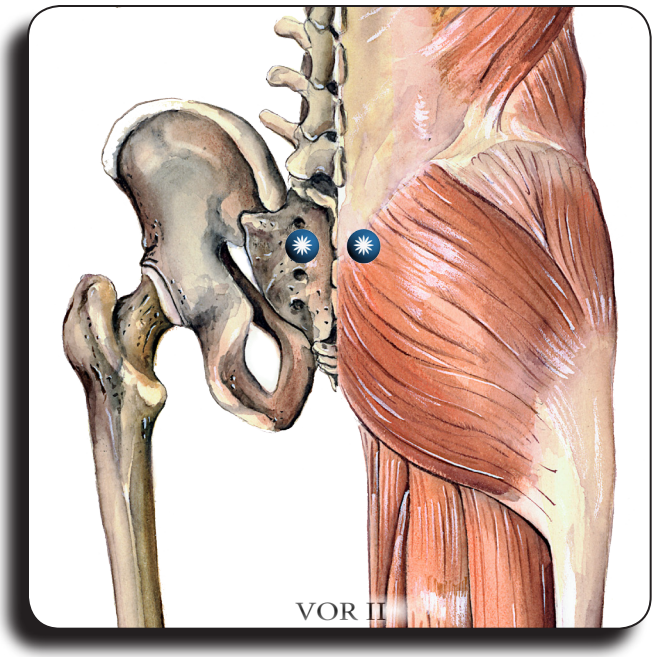

EXTENSOR DIGITORIUM (Lateral Div.)

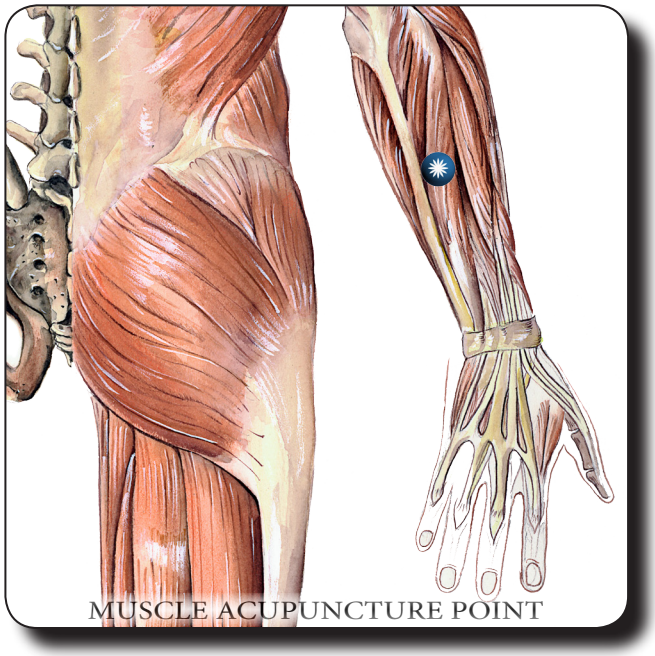
NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 550: EXTENSOR DIGITORUM COMMUNIS MANUS, (Lateral Division)

ORIGIN: Lateral epicondyle of humerus.

INSERTION: Middle and distal phalanges of index and middle finger.

ACTION: Extend the phalanges through midline plane of hand.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Extend index and middle finger, keep finger in midline plane of hand.

Doctor: Position: Ipsilateral.
Brace: Palmar aspect of hand at base of index and middle finger.
Contact: Dorsal surface of above fingers to flex through sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, inferior and medial to B2 near eye orbit.

NEUROLYMPHATIC: (Lat/L) 7th ICS, mid-axillary area.

VISCERAL ORGAN:

I. *Pancreas - sugar:* (Ant/L) Ribcage, anterior aspect, 5th ICS, near K22.

II. *Spleen:* (Post/BL) Pelvic area, posterior aspect, B32 on sacrum.

M. A. P. : Tw9.25

V.L. : T8L

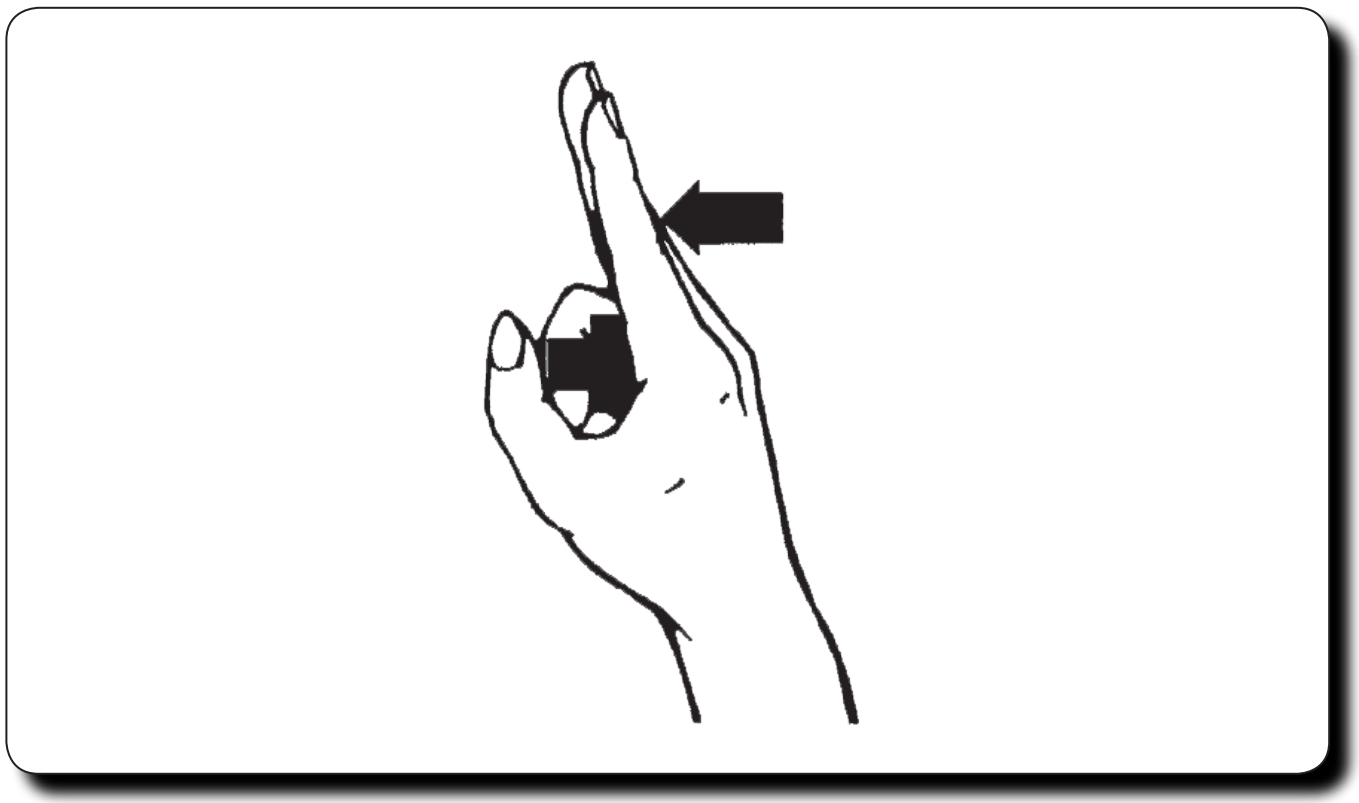
L. B. V.L. : T3L

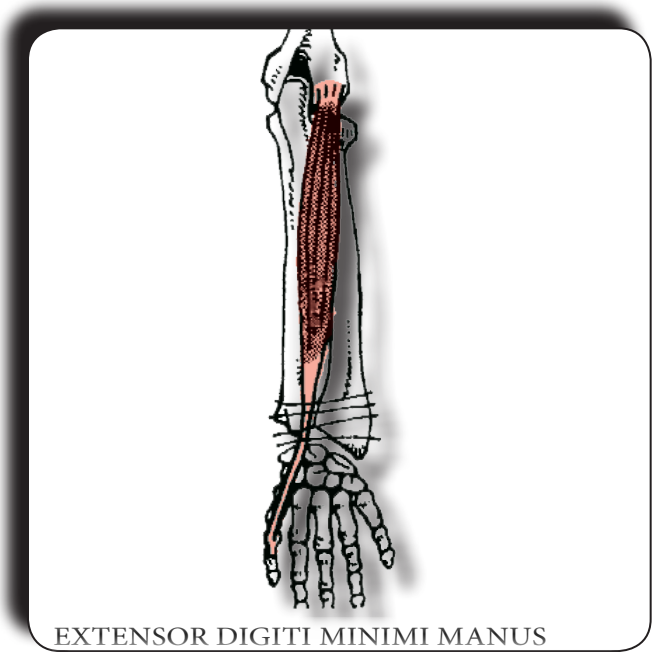
M. M. : C6

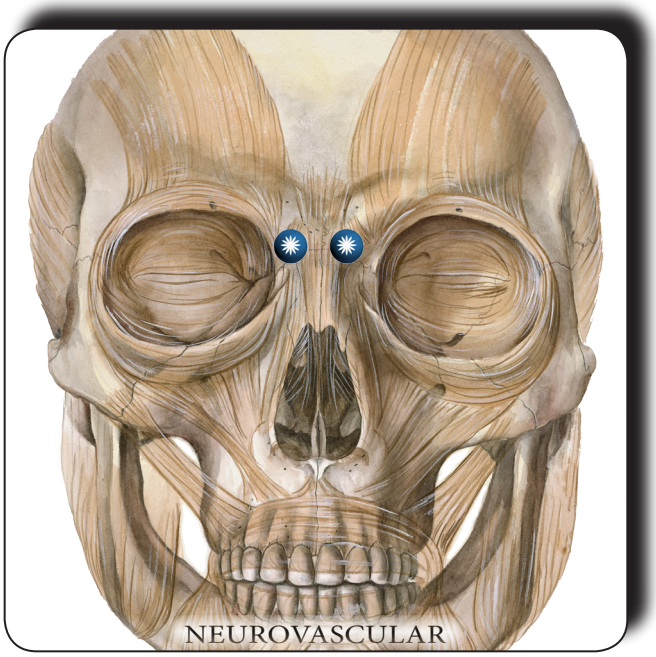
CRANIAL: Parietal

FOOT: Talus

NUTRIENT SOURCE:
1. Fengre (S)




EXTENSOR DIGITI MINIMI MANUS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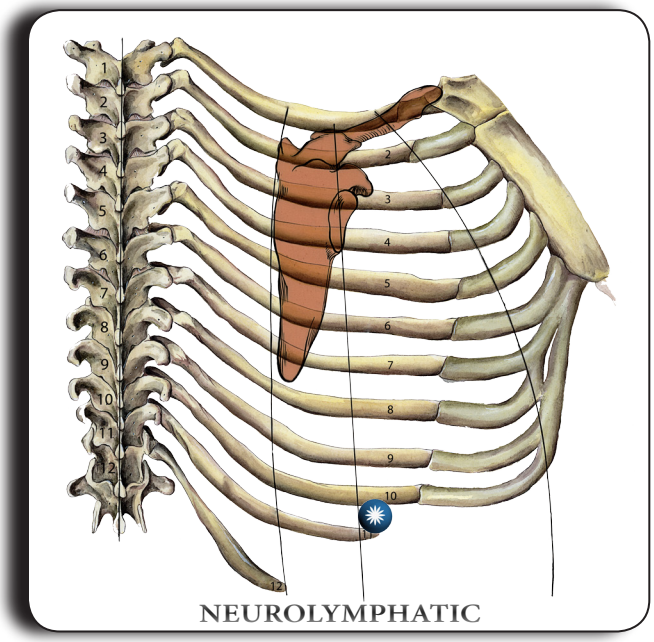
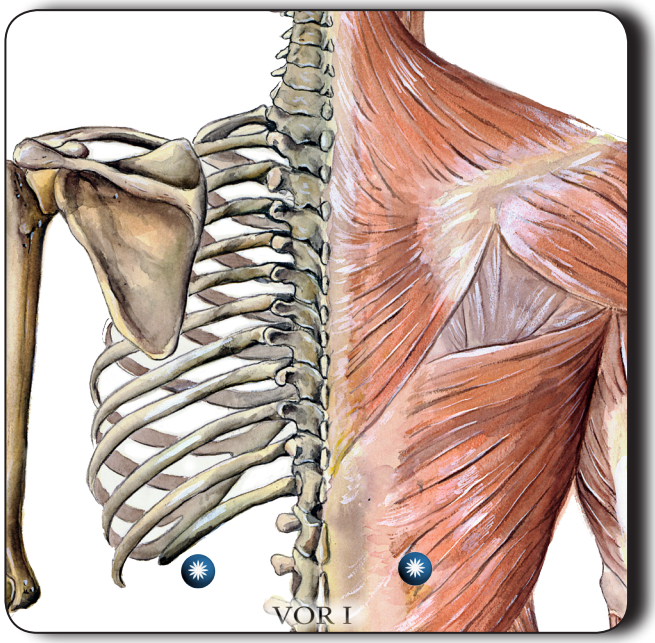
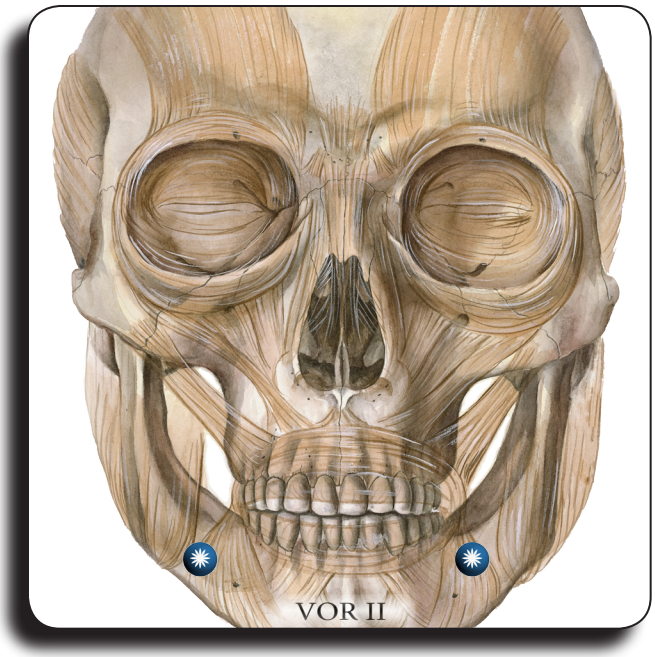
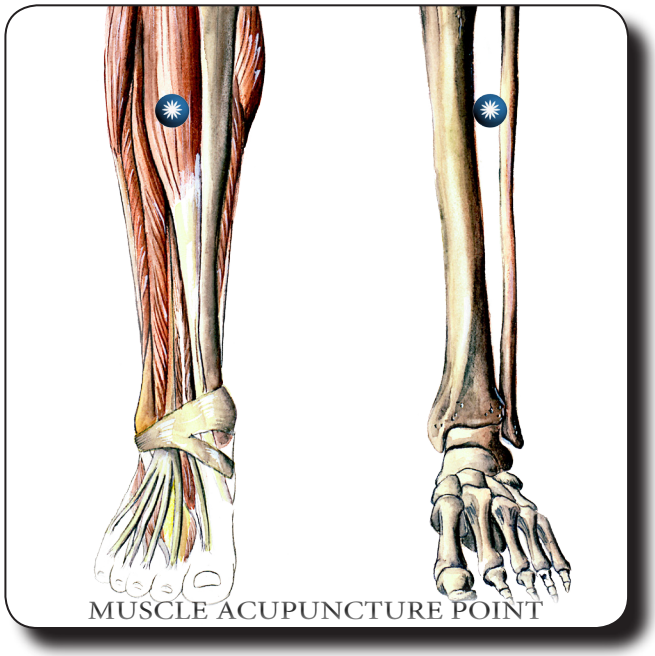


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 552: EXTENSOR DIGITI MINIMI MANUS

ORIGIN: Common extensor tendon and intermuscular septum of forearm.

INSERTION: Joins the expansion of the Extensor Digitorum Communis at the dorsum of 1st phalanx of little finger.

ACTION: Extends the little finger only.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Extend and abduct little finger. Keep other fingers relaxed.

Doctor: Position: Ipsilateral.
Brace: Palmer aspect of hand at base of little finger.
Contact: Dorsal surface of little finger to flex through sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, slightly inferior to glabella.

NEUROLYMPHATIC: (Post/R) 10th ICS, near tip of 11th rib.

VISCERAL ORGAN:

I. *Lungs:* (Post/BL) Spinal Column, lumbar area, B46, inferior to 12th rib.

II. *Posterior Pituitary:* (Ant/BL) Mandible, superior to St5

M. A. P. : St37

V.L. : L1R

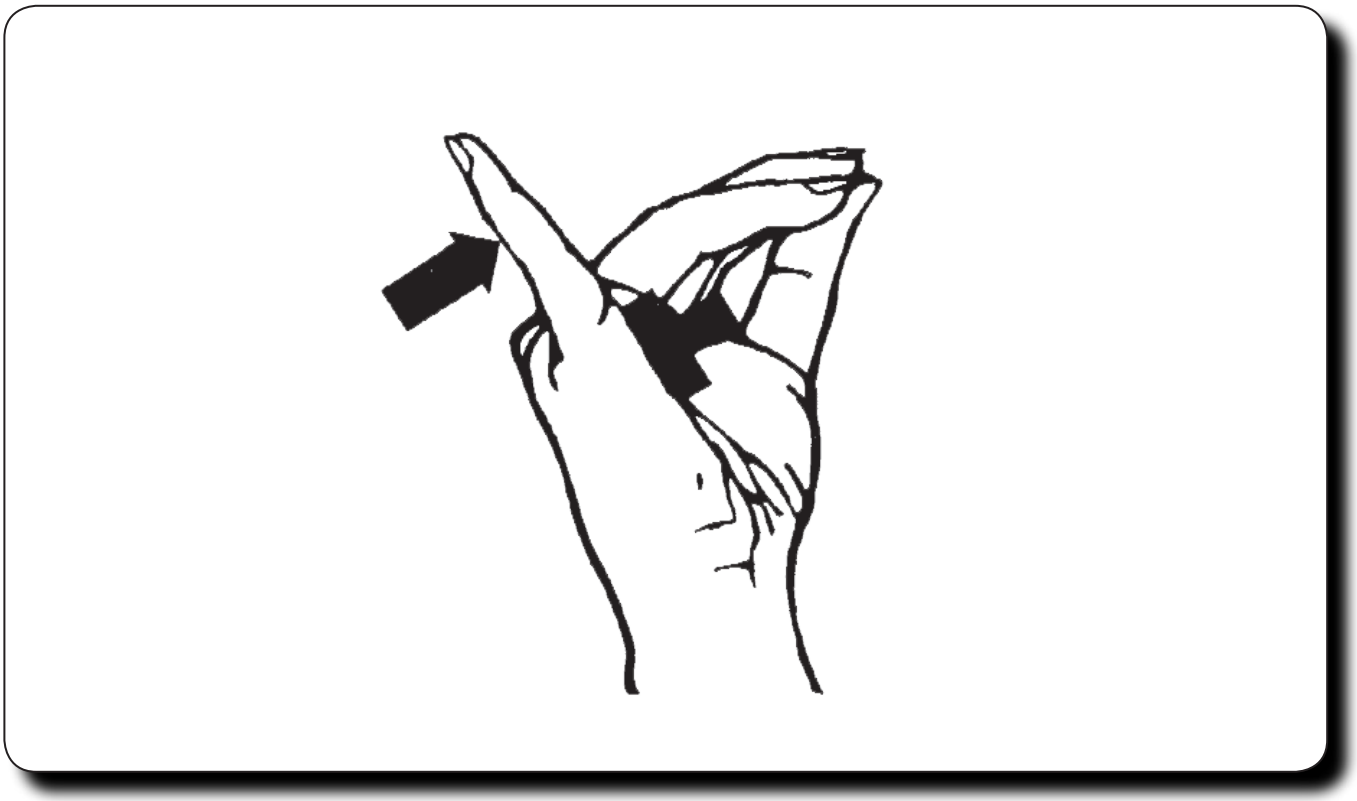
L. B. V.L. : C5R

M. M. : T1

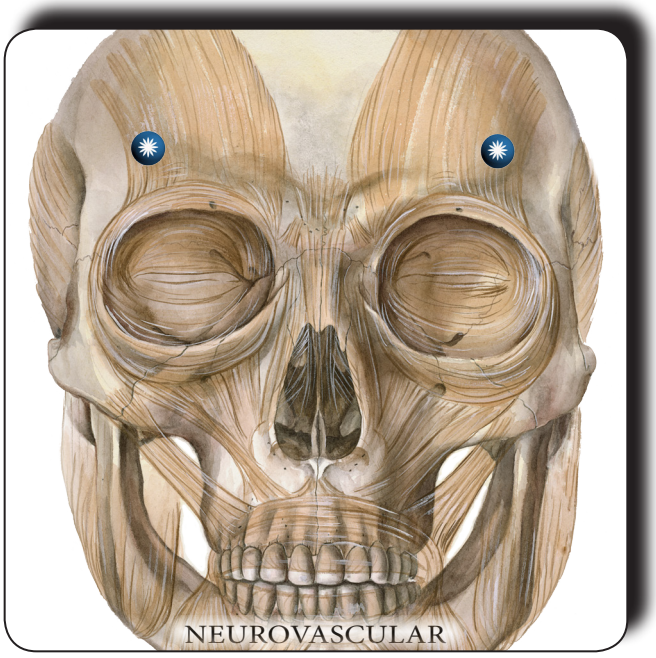
CRANIAL: Lacrimal

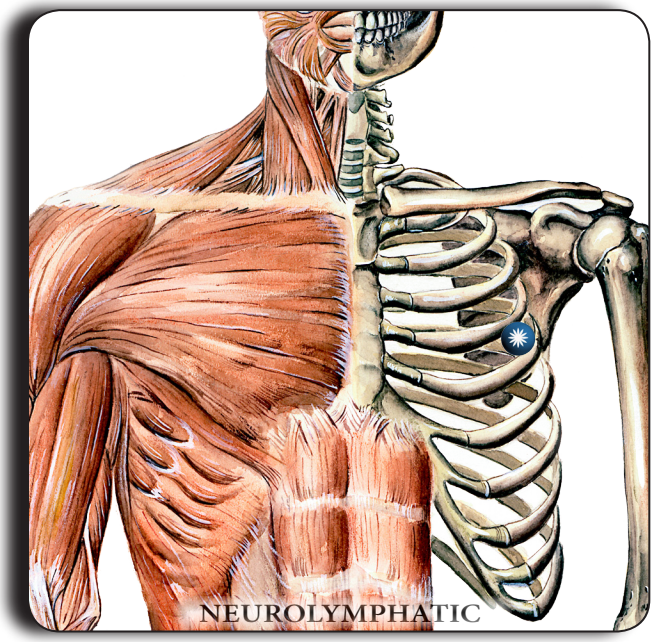
FOOT: Proximal phalanx 2nd toe

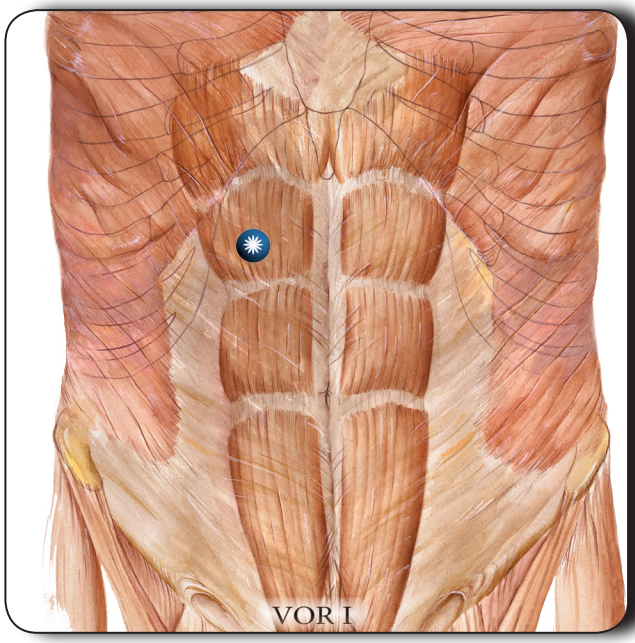
NUTRIENT SOURCE:

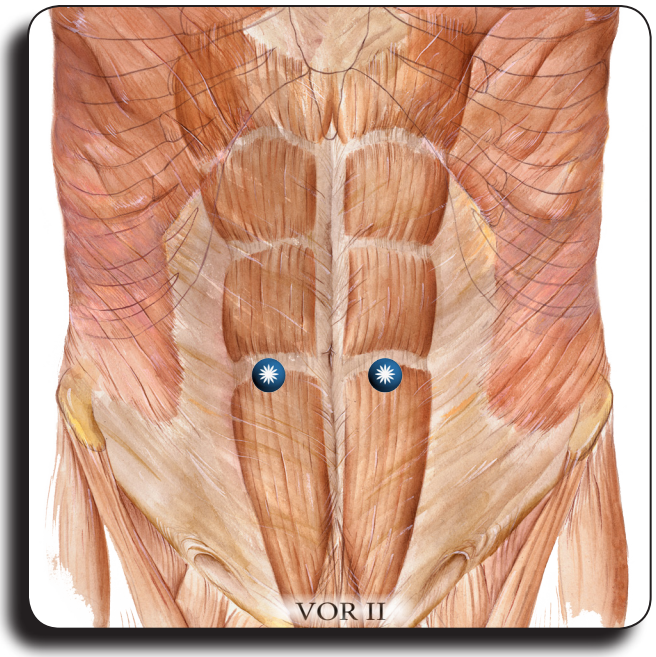


EXTENSOR INDICIS PROPRIUS


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II

MUSCLE ACUPUNCTURE POINT

Muscle 554: EXTENSOR INDICIS PROPRIUS

ORIGIN: Distal third and dorsal surface of the body of the ulna and intermuscular septum.

INSERTION: Joins with tendon of Extensor Digitorum Communis to insert on the dorsal surface of the middle phalanx of index finger.

ACTION: Extends and adducts the index finger.

TEST:

Patient: Supine. Flex forearm on arm 90 degrees. Relax all fingers except index. Extend and adduct index finger.

Doctor: Position: Ipsilateral.
Brace: Palmer aspect of hand at base of index finger.
Contact: Dorsal surface of index finger to flex through sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, lateral to frontal eminence.

NEUROLYMPHATIC: (Ant/L) 4th ICS, 1-2" lateral to nipple.

VISCERAL ORGAN:

I. *Pancreas - Sugar:* (Ant/R) Rectus Abdominis, 3rd section.

II. *Kidney:* (Ant/BL) Rectus Abdominis, insertion of 1st section, 1 1/2" lateral to midline.

M. A. P. : Li13

V.L. : C4L

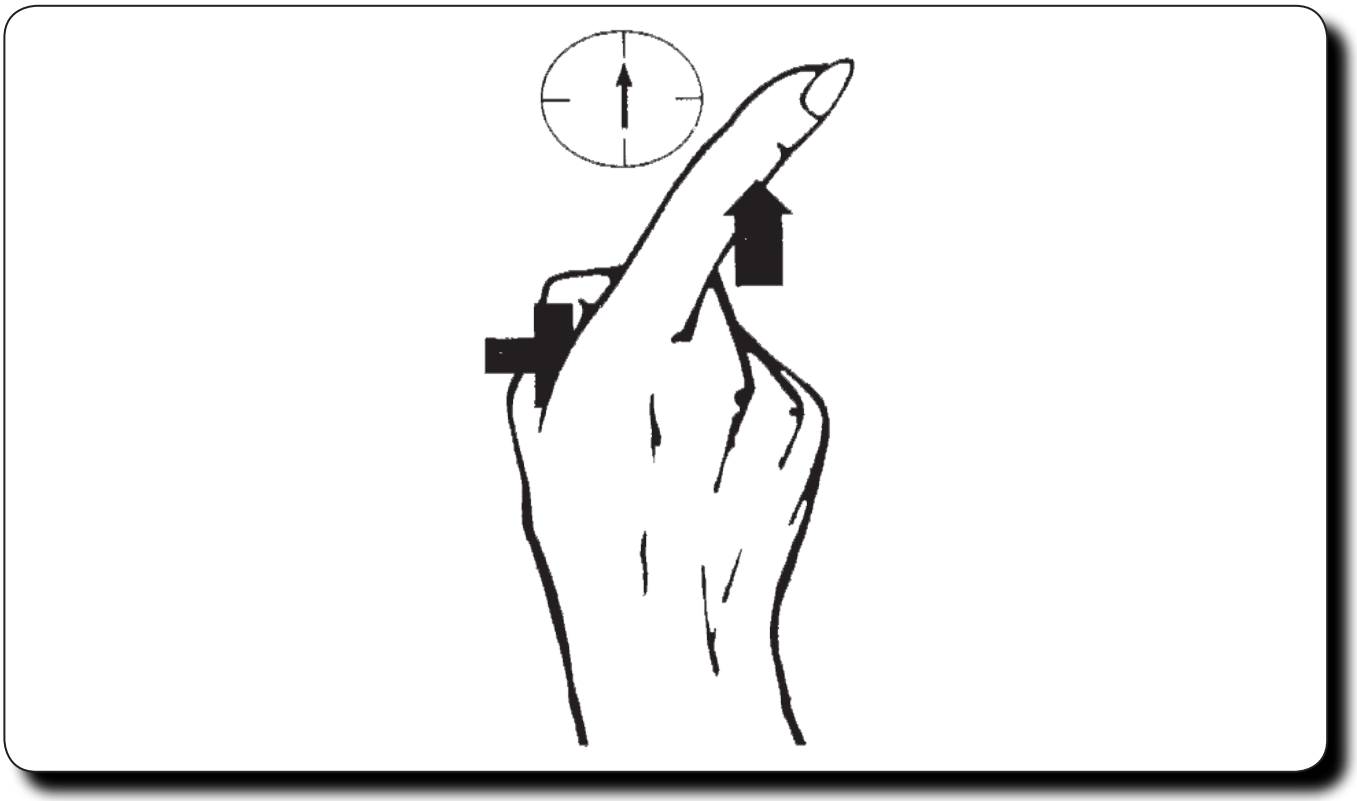
L. B. V.L. : L2L

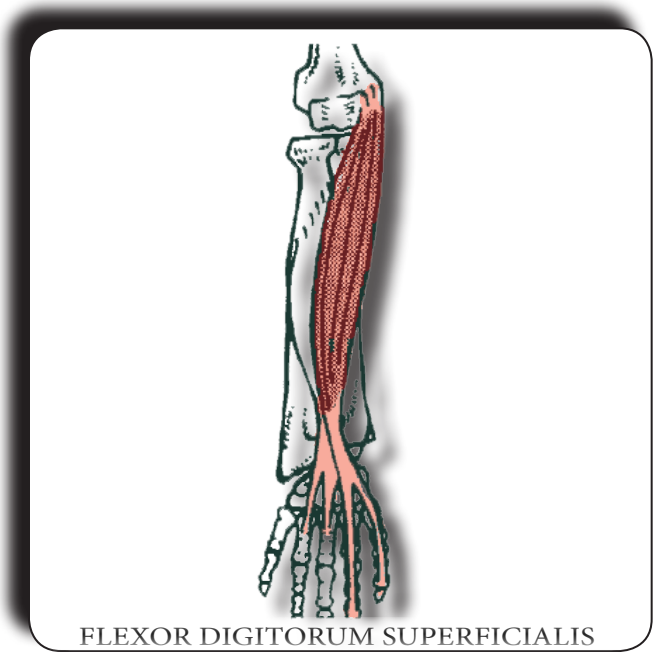
M. M. : C7

CRANIAL: Temporal

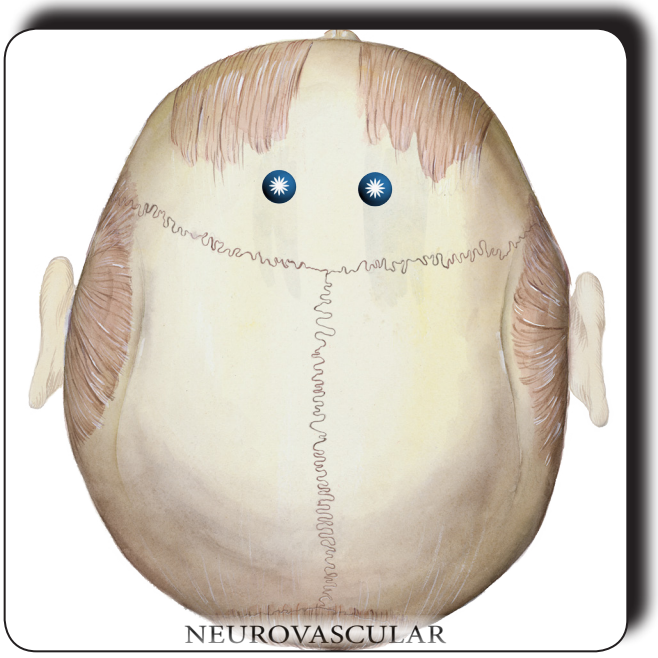
FOOT: Cuboid

NUTRIENT SOURCE:
1. Super EFF (S)
2. Betacol (S)

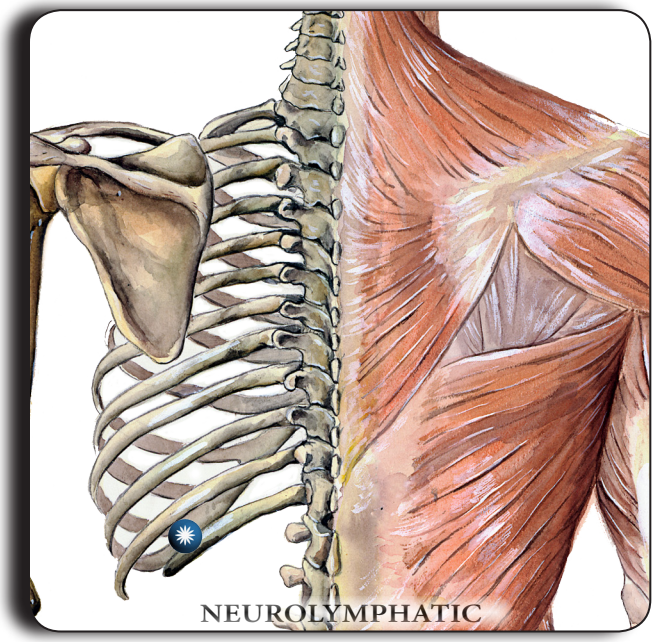




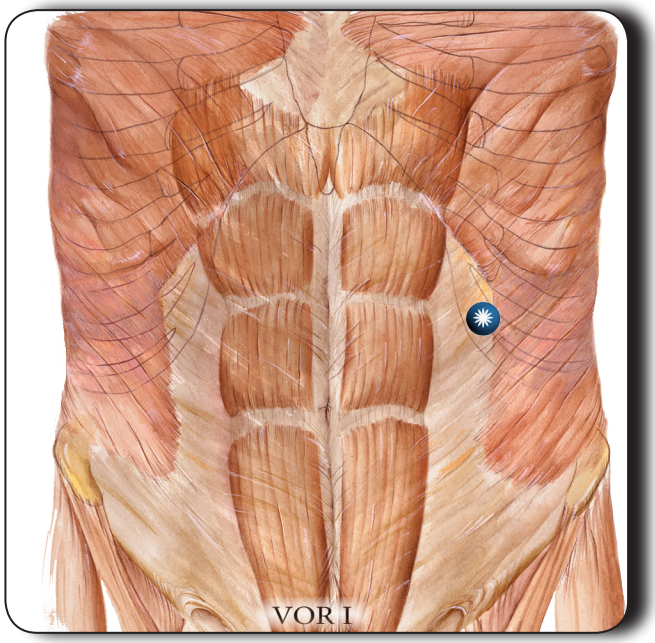
FLEXOR DIGITORUM SUPERFICIALIS



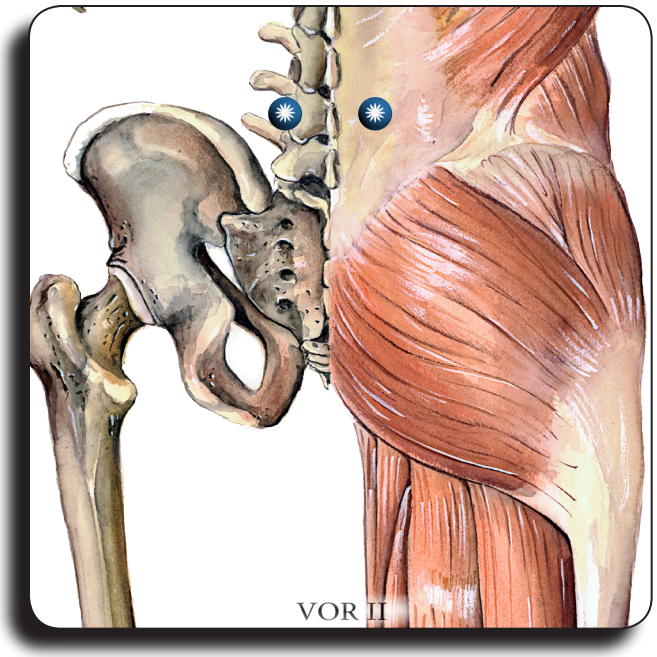
NEUROVASCULAR



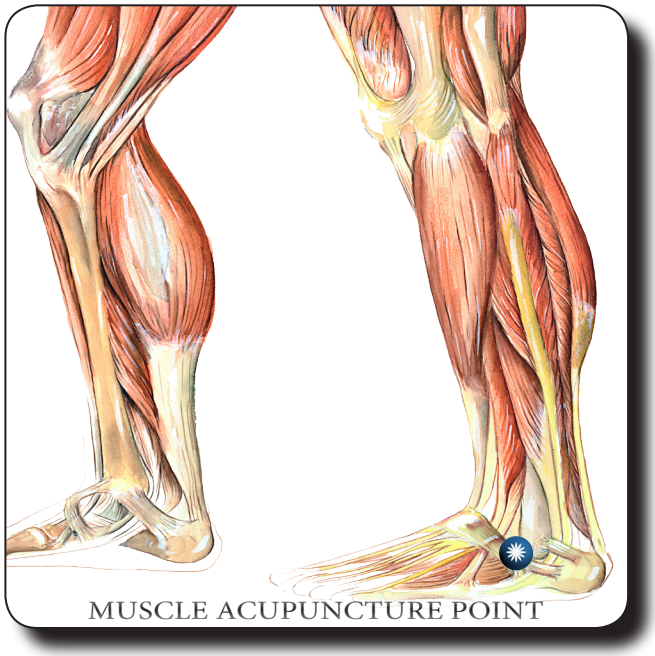
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 556: FLEXOR DIGITORUM SUPERFICIALIS, (Medial Division)

ORIGIN: Humeral and Ulnar Heads: Medial epicondyle of humerus, ulnar collateral ligament, medial side of coronoid process of ulnar intramuscular septum.

INSERTION: Sides of middle phalanx of ring and little finger.

ACTION: Flexes the 2nd phalanx of the ring and little finger.

TEST:

Patient: Supine. Supinate forearm on arm. Flex middle phalanx while extending distal phalanx of ring and little finger

Doctor: Position: Ipsilateral.
Brace: Proximal phalanx.
Contact: Distal and middle phalanx to extend through sagittal plane.

NEUROVASCULAR: (Sup/BL) Frontal bone, superior aspect, 1/2" anterior and 1" lateral to anterior fontanelle.

NEUROLYMPHATIC: (Post/L) 11th ICS, 1" medial to tip of 12th rib.

VISCERAL ORGAN:

I. *Pancreas - Sugar:* (Ant/L) Abdomen, lateral aspect, Sp15.8

II. *Lymph Gland:* (Post/BL) Spinal Column, lumbar area, B24, between L4 and L5 transverse processes.

M. A. P. : G40.2

V.L. : T5R

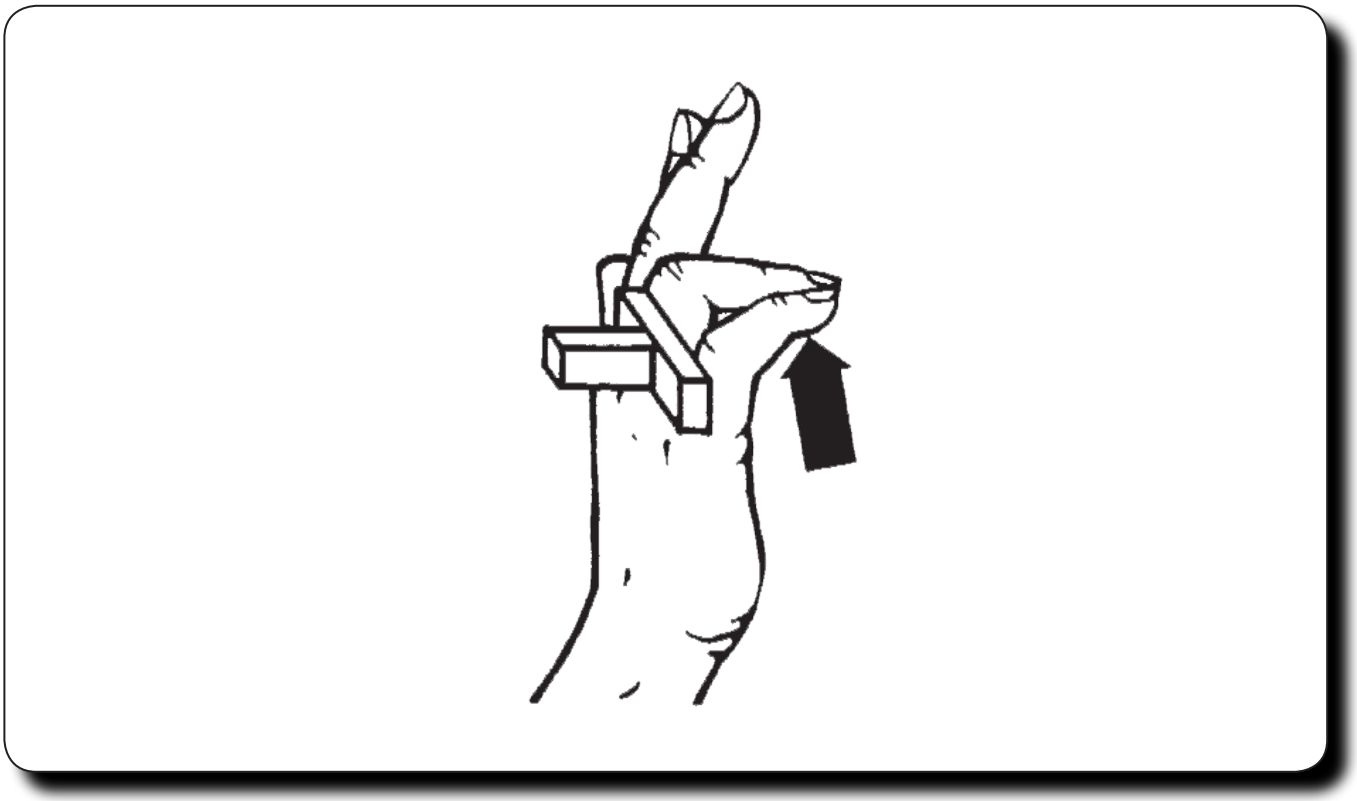
L. B. V.L. : T6R

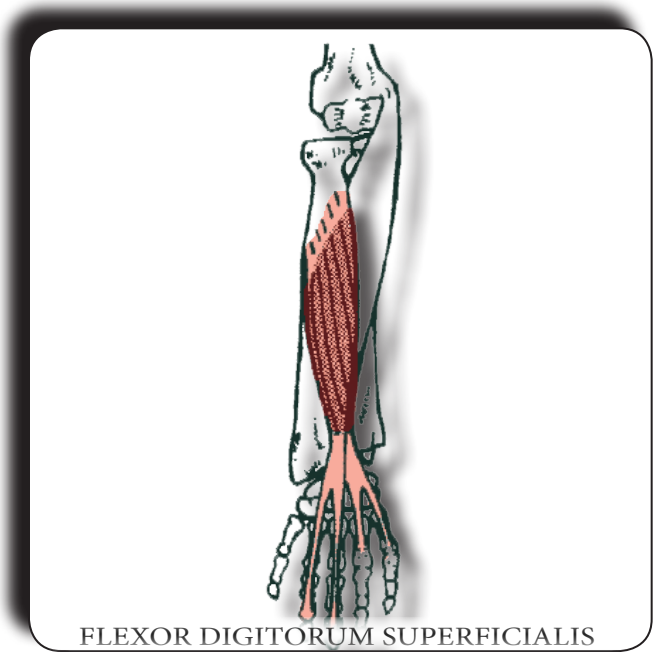
M. M. : T1

CRANIAL: Vomer

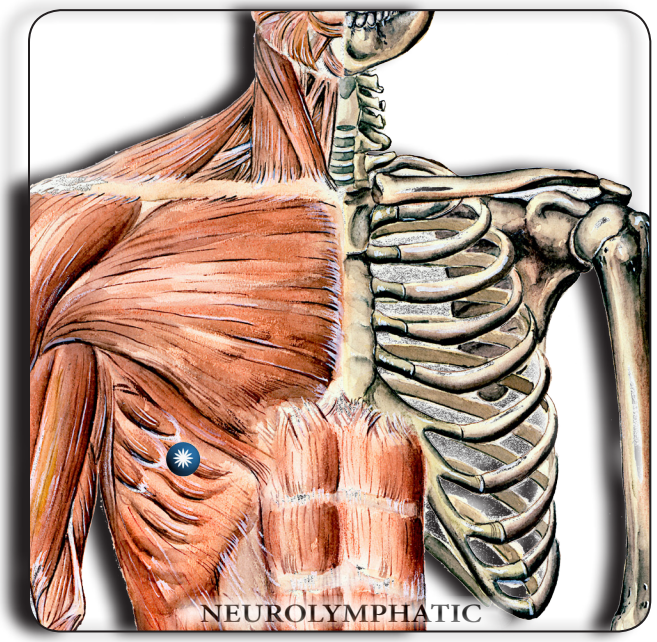
FOOT: 2nd Metatarsal

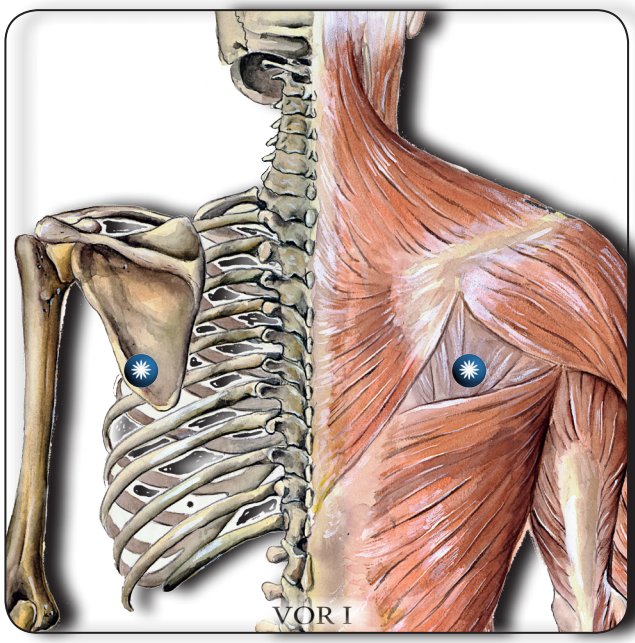
NUTRIENT SOURCE:
In Research

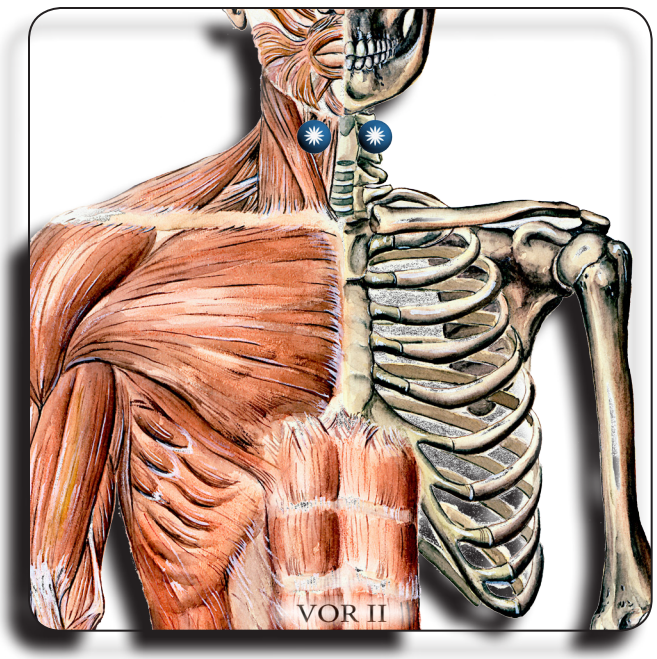


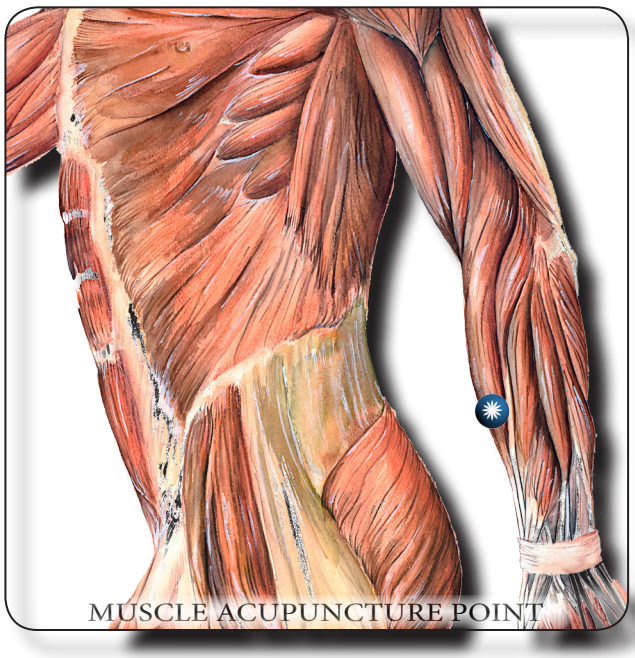

FLEXOR DIGITORUM SUPERFICIALIS

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 558: FLEXOR DIGITORUM SUPERFICIALIS, (Lateral Division)

ORIGIN: Radial Head: Oblique line of radius from radial tuberosity to the origin of Pronator Teres.

INSERTION: Sides of middle phalanx of index and middle finger.

ACTION: Flexes the 2nd phalanx of the index and middle finger.

TEST:

Patient: Supine. Supinate forearm on arm. Flex middle phalanx while extending distal phalanx of index and middle finger.

Doctor: Position: Ipsilateral.
Brace: Proximal phalanx of index and middle finger
Contact: Distal and middle phalanx of index and middle finger to extend through sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, at medial superior aspect of prominence.

NEUROLYMPHATIC: (Ant/R) 6th ICS, below nipple.

VISCERAL ORGAN:

I. *Tonsils:* (Post/BL) Scapula, posterior aspect, inferior angle in belly of Teres Major.

II. *Anterior Pituitary:* (Ant/BL) Neck, anterior aspect, superior and medial to SCM at level of Cv23.

M. A. P. : Li8

V.L. : L2L

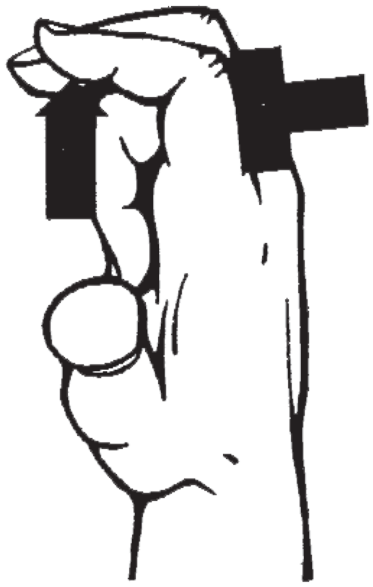
L. B. V.L. : C4L

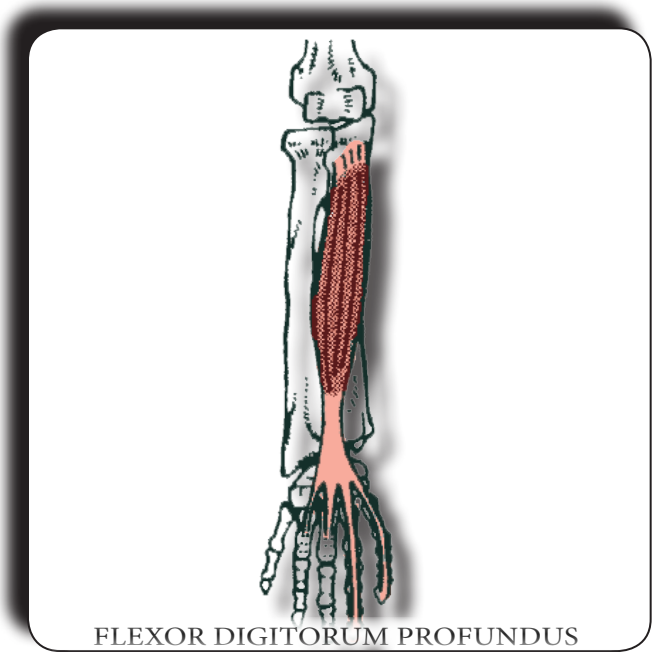
M. M. : T1

CRANIAL: Glabella

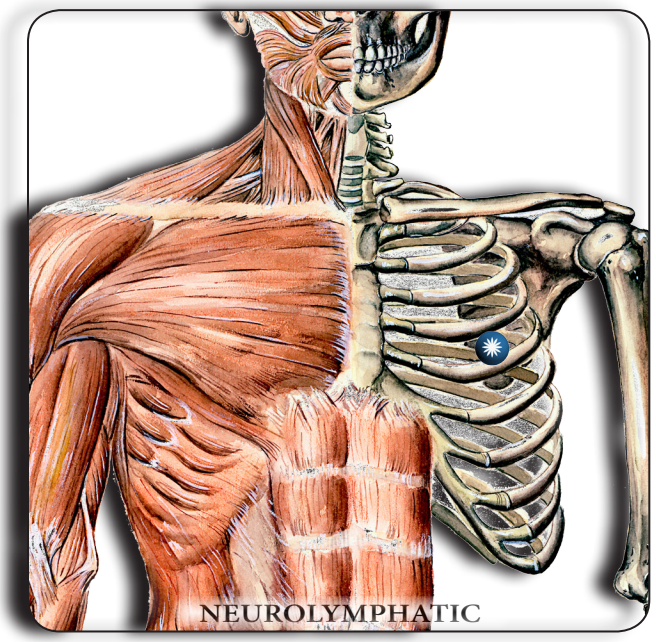
FOOT: 4th Metatarsal

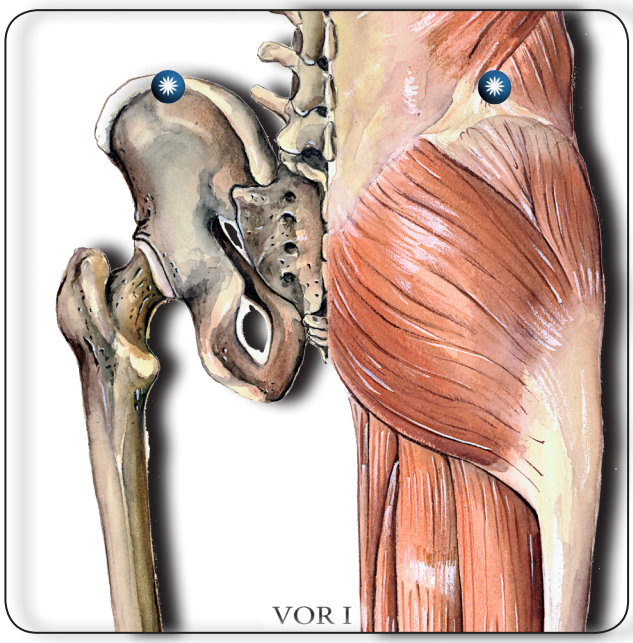
NUTRIENT SOURCE:
1. Nutrimere (S)
2. Protefood (S)

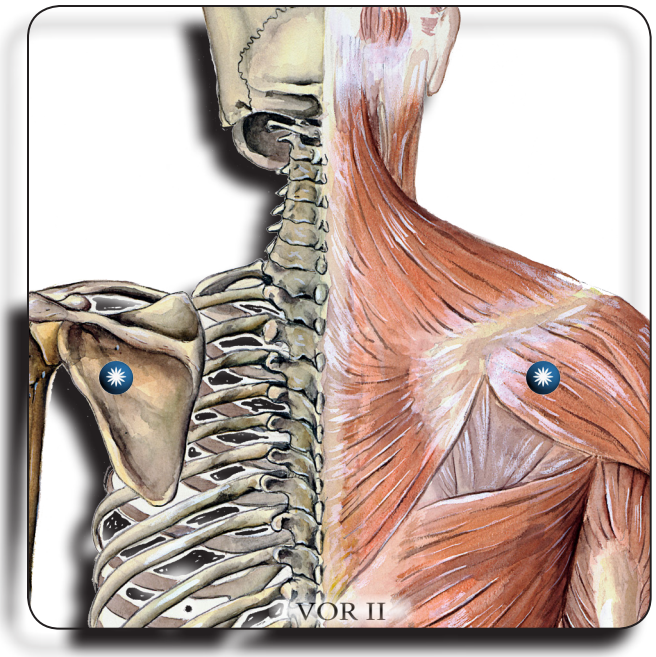


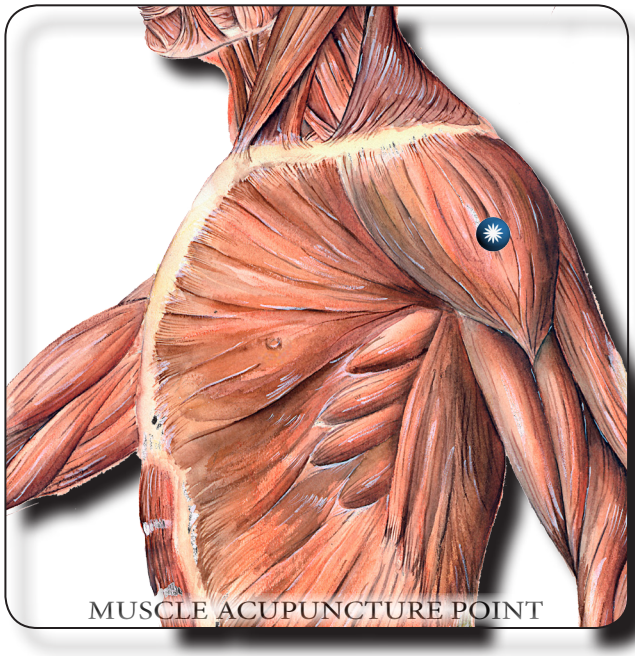

FLEXOR DIGITORUM PROFUNDUS

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 560: FLEXOR DIGITORUM PROFUNDUS MANUS, (Medial Division)

ORIGIN: Upper three-fourths of anterior and medial surface of ulna.

INSERTION: Distal phalanges of ring and little finger.

ACTION: Flexes the distal phalanx of the ring and little finger.

TEST:

Patient: Supine. Supinate forearm on arm while extending 1st and 2nd phalanx. Flex distal phalanx of ring and middle finger.

Doctor: Position: Ipsilateral.
Brace: 1st and 2nd phalanges to keep extended.
Contact: Palmar surface of distal phalanx of ring and little finger to extend through sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, inferior to hairline, and 2" lateral to midline.

NEUROLYMPHATIC: (Ant/L) 4th ICS, near nipple.

VISCERAL ORGAN:

I. *Bladder:* (Post/BL) Pelvis, posterior aspect, crest of ilium at posterior attachment of Obliquus Externus.

II. *Spleen:* (Post/BL) Scapula, Si10.3, 1" in posterior Deltoid muscle.

M. A. P. : Li14.5

V.L. : L4R

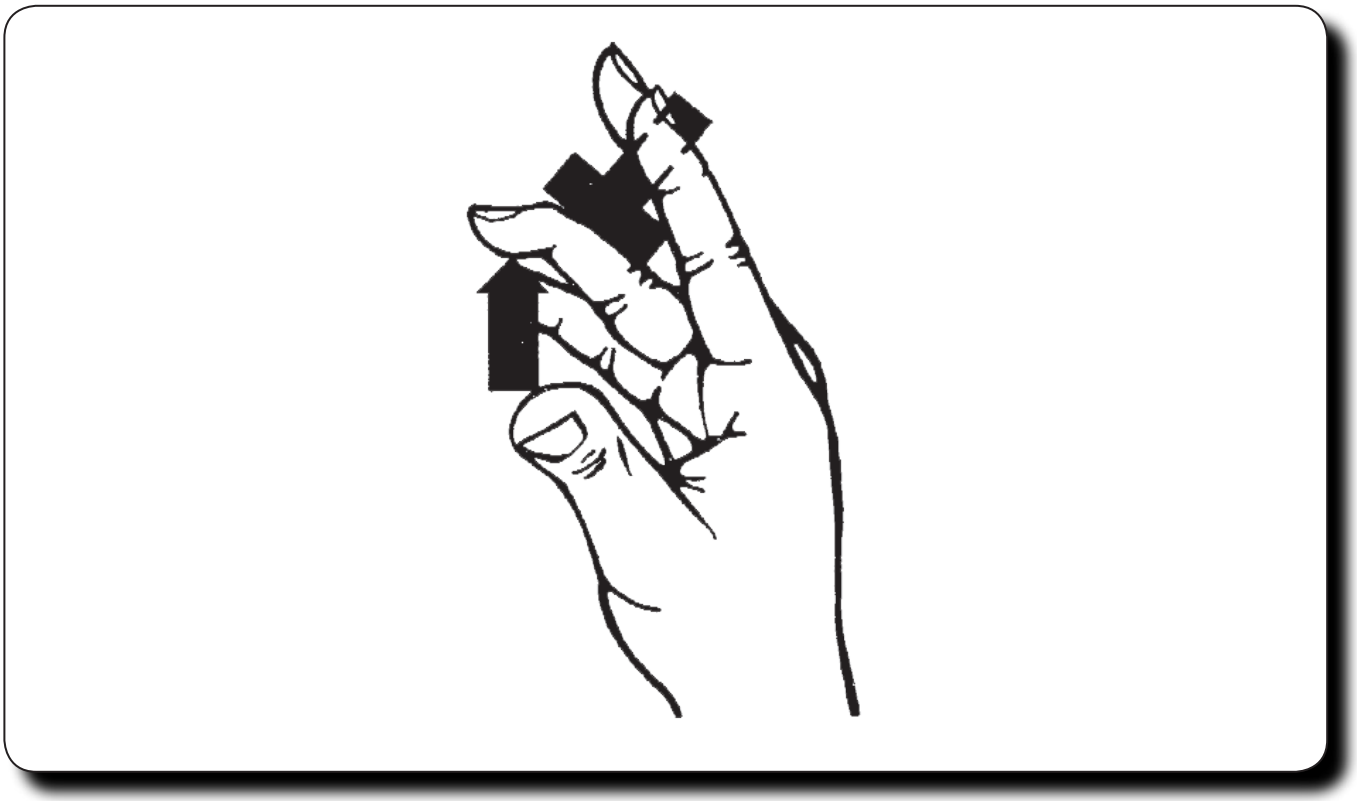
L. B. V.L. : C2R

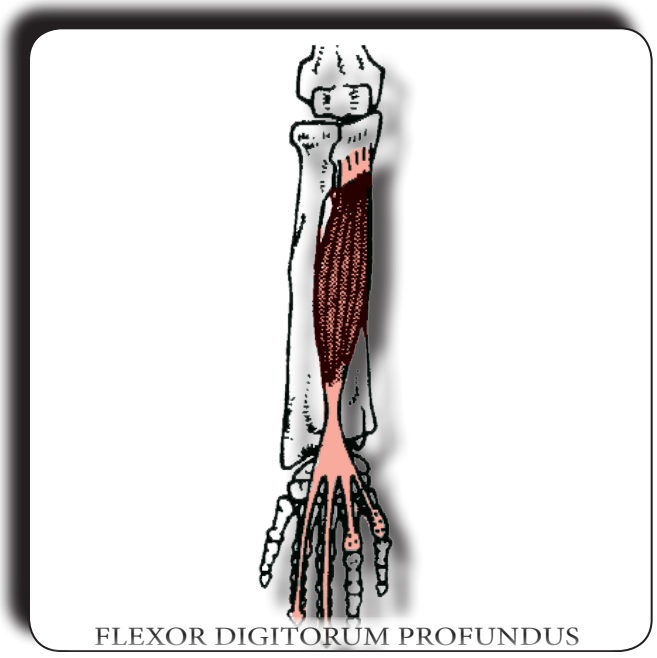
M. M. : T2

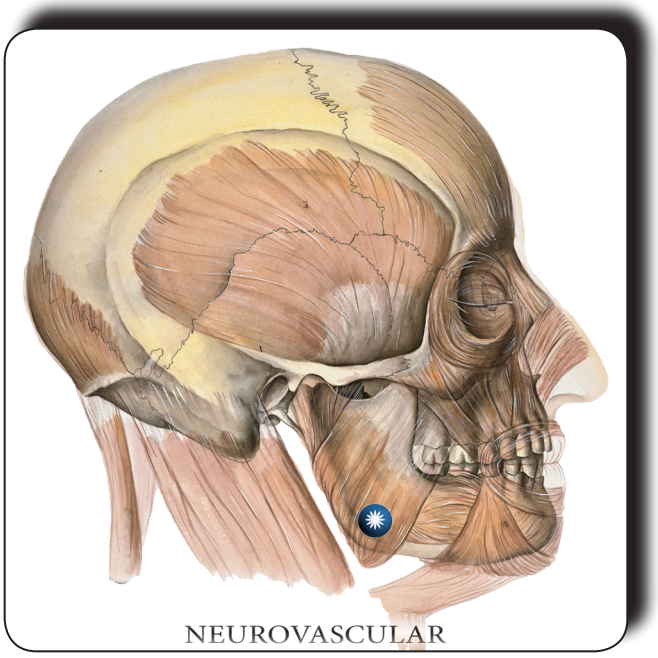
CRANIAL: Palatine

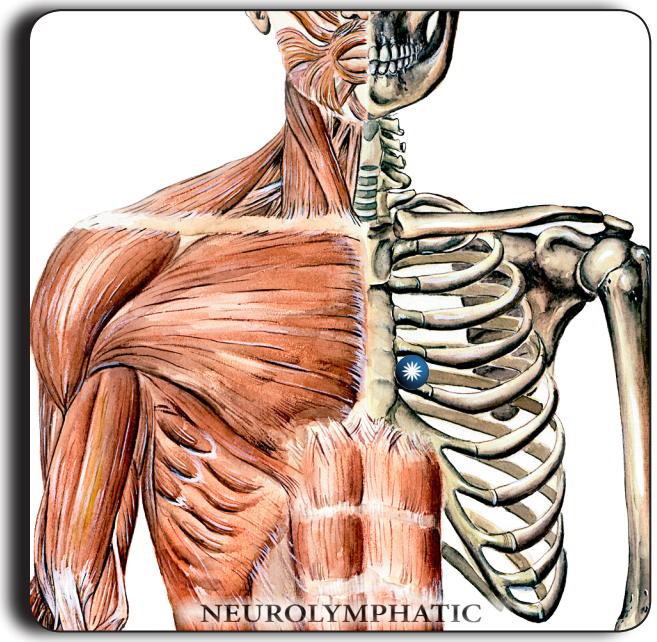
FOOT: 1st Metatarsal

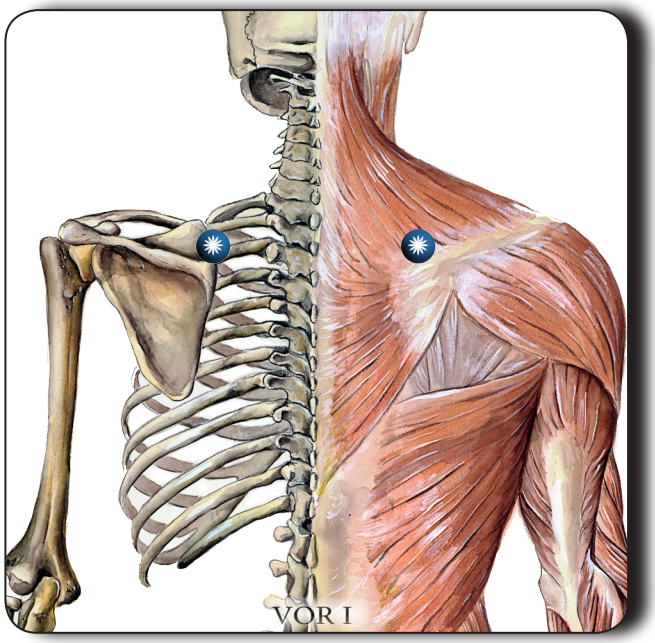
NUTRIENT SOURCE:
1. Min-Chex (S)

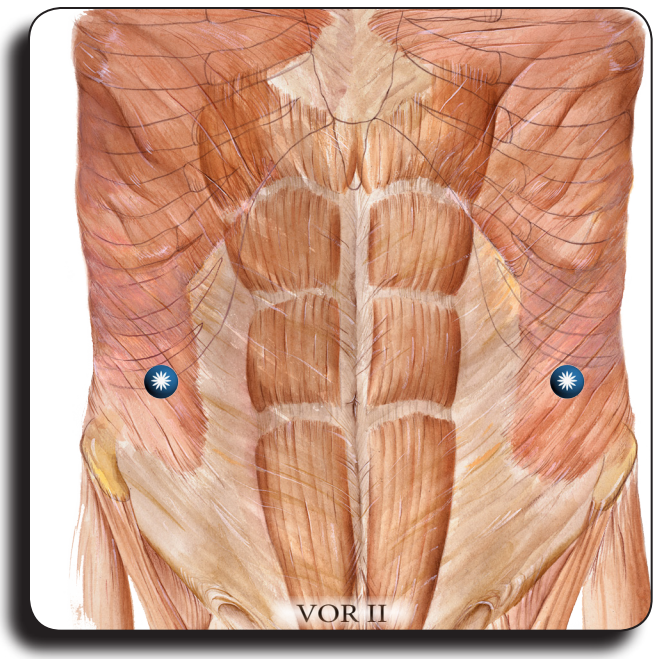


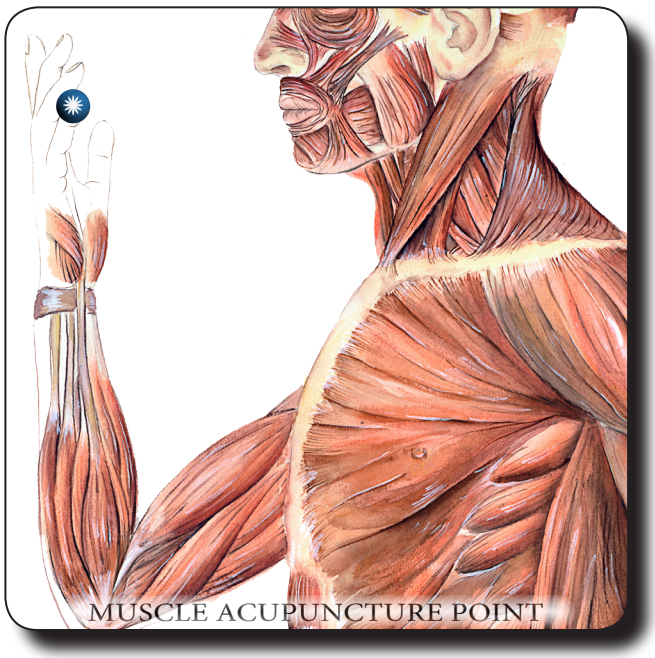

FLEXOR DIGITORUM PROFUNDUS


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 562: FLEXOR DIGITORUM PROFUNDUS MANUS, (Lateral Division)

ORIGIN: Anterior medial and superior aspects of ulna including Brachialis attachments.

INSERTION: Distal phalanges of index and middle finger.

ACTION: Flexes the distal phalanx of the index and middle finger.

TEST:

Patient: Supine. Supinate forearm on arm. While extending 1st and 2nd phalanx, flex distal phalanx of index and middle finger.

Doctor: Position: Ipsilateral.
Brace: 1st and 2nd phalanges to keep extended.
Contact: Palmar surface of distal phalanx of index or middle finger to extend through sagittal plane.

NEUROVASCULAR: (Lat) Mandible, inside surface at angle near Pterygoid Internus attachment.

NEUROLYMPHATIC: (Ant/L) 4th ICS, 1/2" lateral to sternum.

VISCERAL ORGAN:

I. *Jejunum:* (Post/BL) Scapula, Supraspinatus fossa, medial border near B36

II. *Liver:* (Ant/BL) Abdomen, near tip of 10th rib.

M. A. P. : Si1

V.L. : T6R

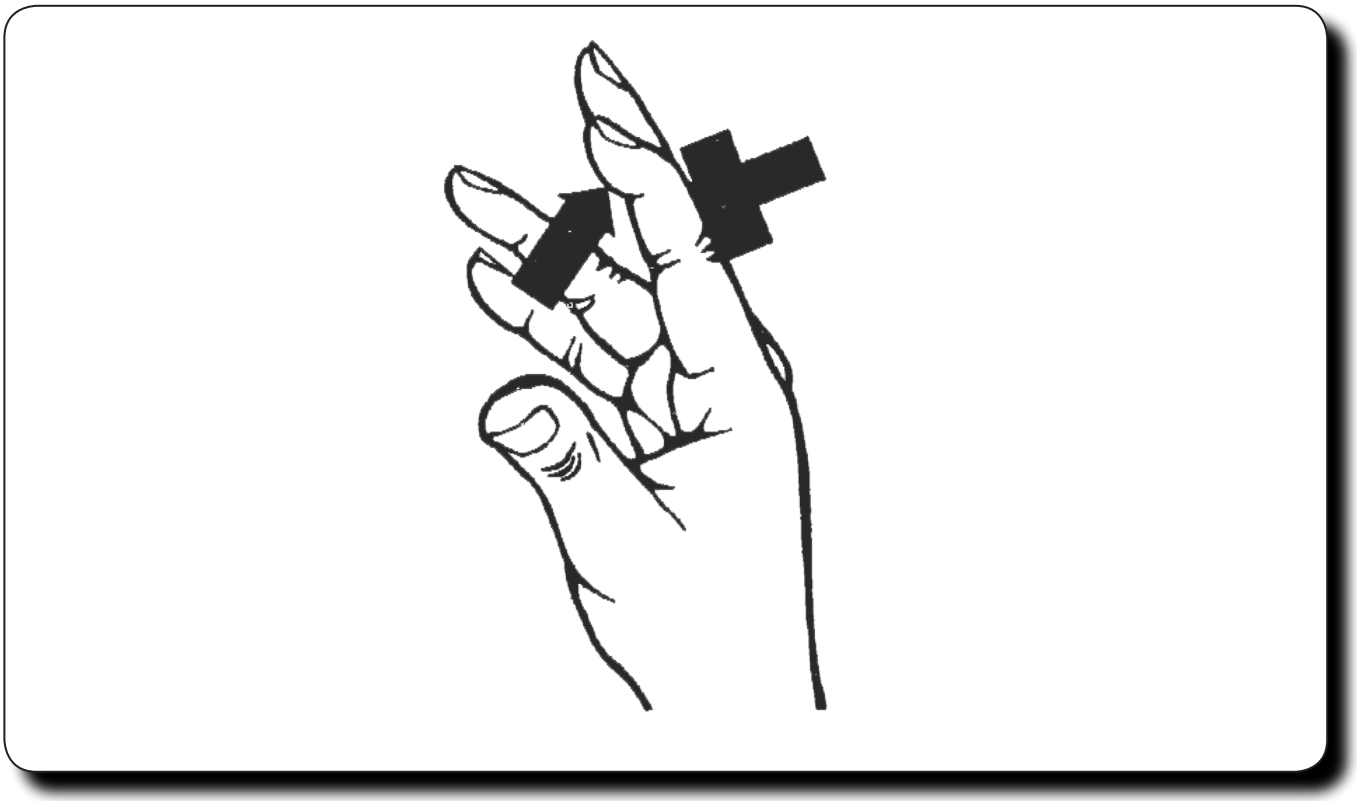
L. B. V.L. : T5R

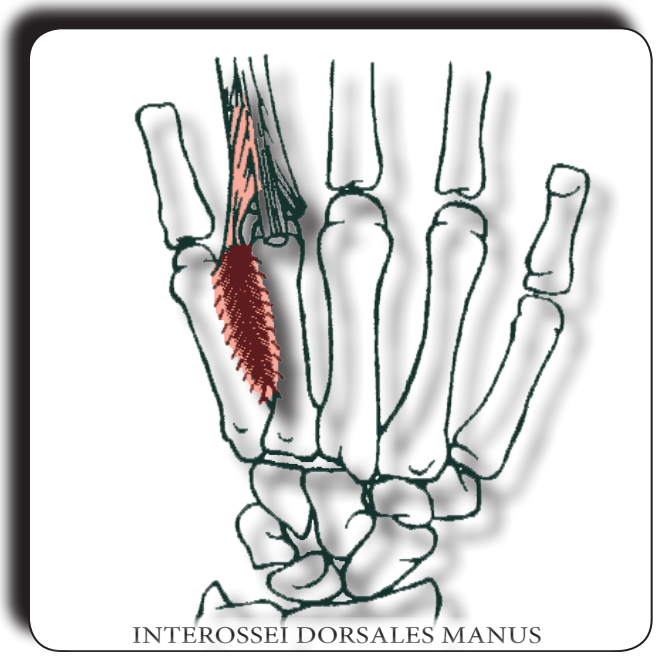
M. M. : T1

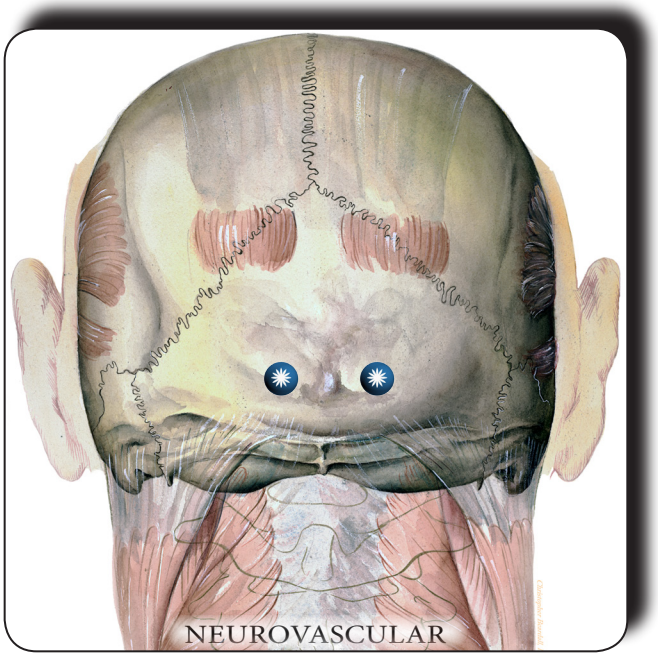
CRANIAL: In Research

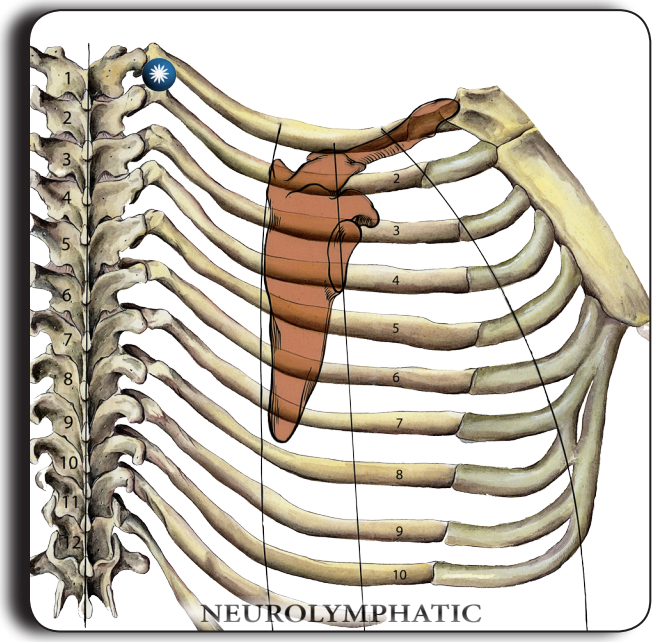
FOOT: In Research

NUTRIENT SOURCE:
1. Complex F (S)




INTEROSSEI DORSALES MANUS


NEUROVASCULAR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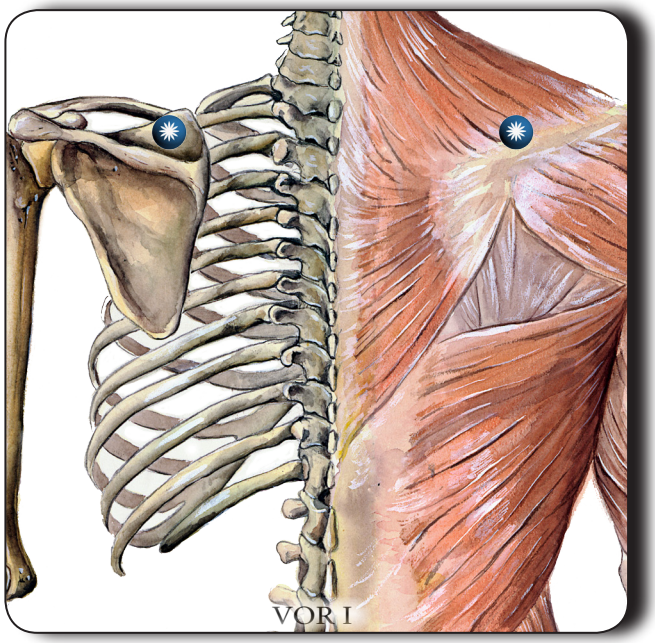
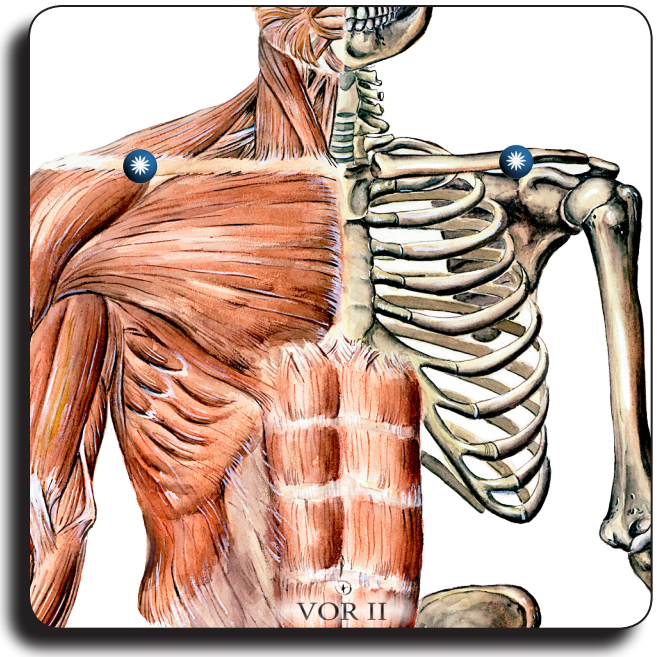
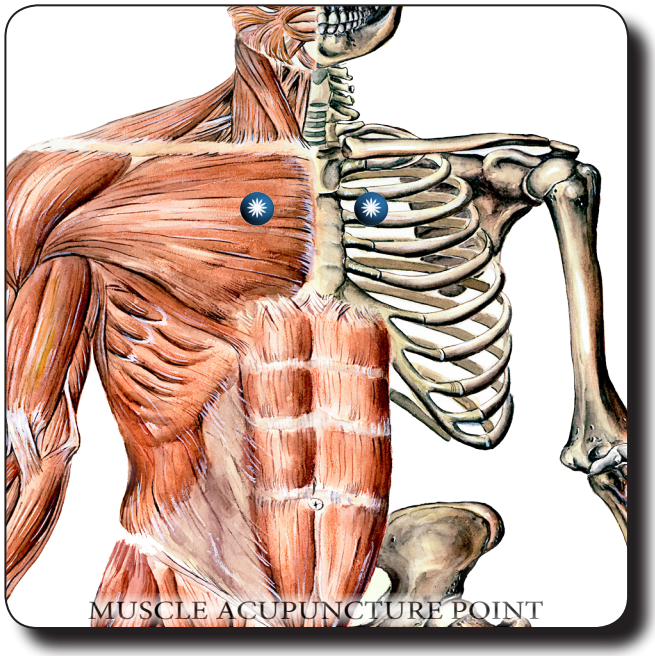
NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 564: INTEROSSEI DORSALES MANUS, (Fourth Division)

ORIGIN: Bipenate muscle arising by two heads. Medial head from the ulnar border of the 4th metacarpal. Lateral head from the radial border of the 5th metacarpal.

INSERTION: Ulnar border of the proximal phalanx of the ring finger.

ACTION: Abducts the ring finger away from the midline of hand.

TEST:

Patient: Supine. Pronate forearm on arm. Extend and abduct ring finger.

Doctor: Position: Ipsilateral.
Brace: The following fingers: little, middle and index.
Contact: The ulnar border of the ring finger to adduct toward midline of hand.

NEUROVASCULAR: (Post/BL) Occipital bone, superior and lateral to EOP.

NEUROLYMPHATIC: (Post/R) 1st ICS, 1" lateral to spine .

VISCERAL ORGAN:

I. *Heart:* (Post/BL) Scapula, supraspinous fossa, 1-2" lateral to vertebral border.

II. *Thymus:* (Ant/BL) Clavicle, superior aspect, 1-2" medial to clavicular-scapular junction.

M. A. P. : K25

V.L. : T1L

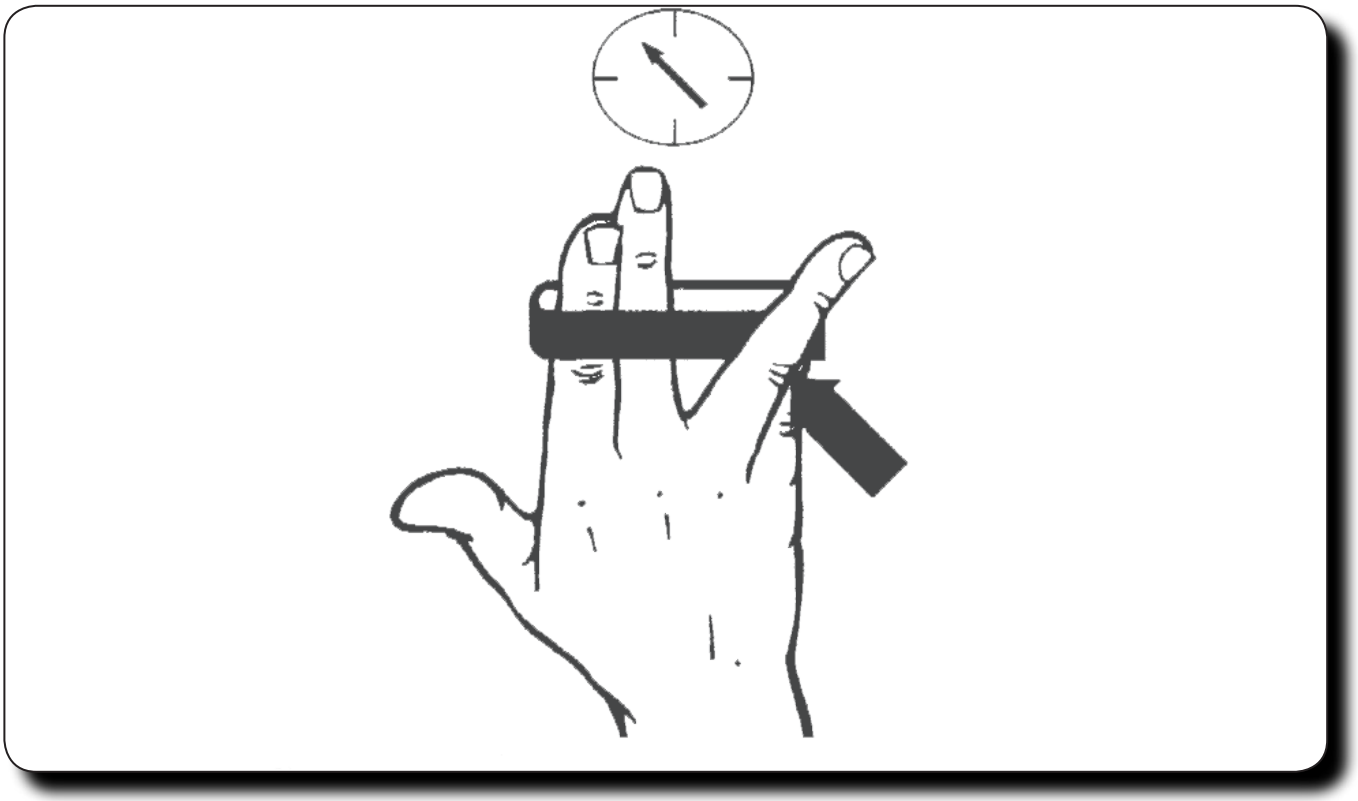
L. B. V.L. : T10L

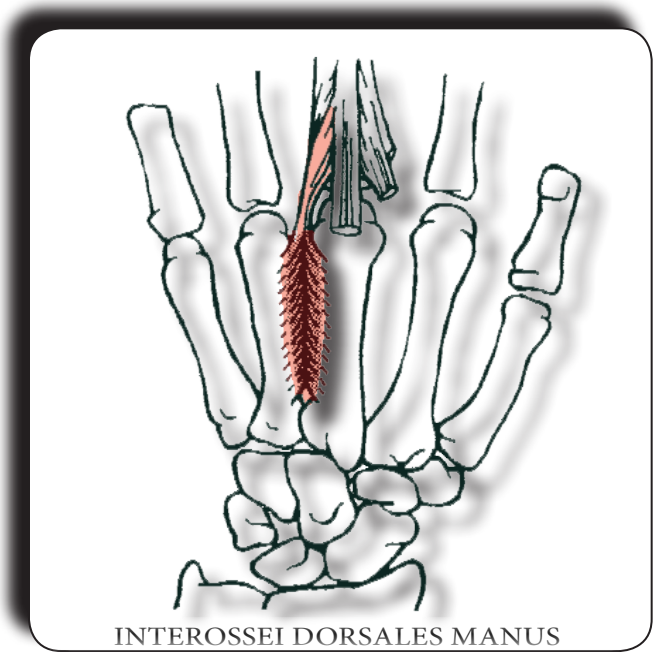
M. M. : T 8

CRANIAL: Frontal

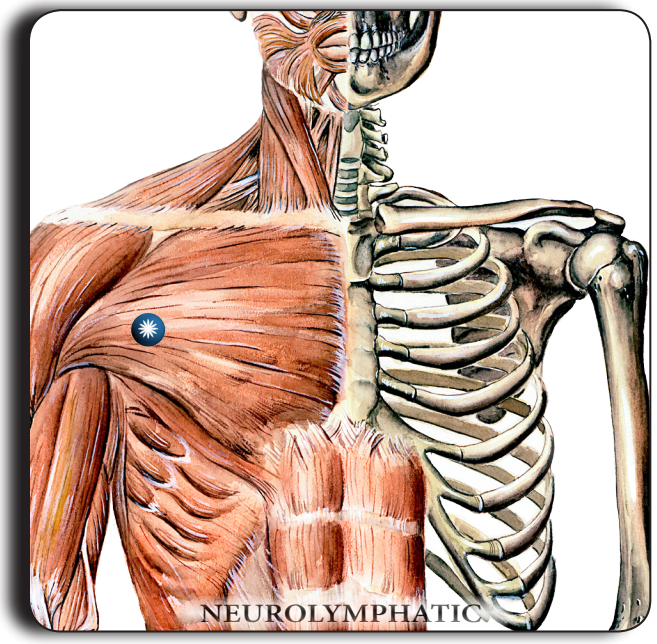
FOOT: Navicular

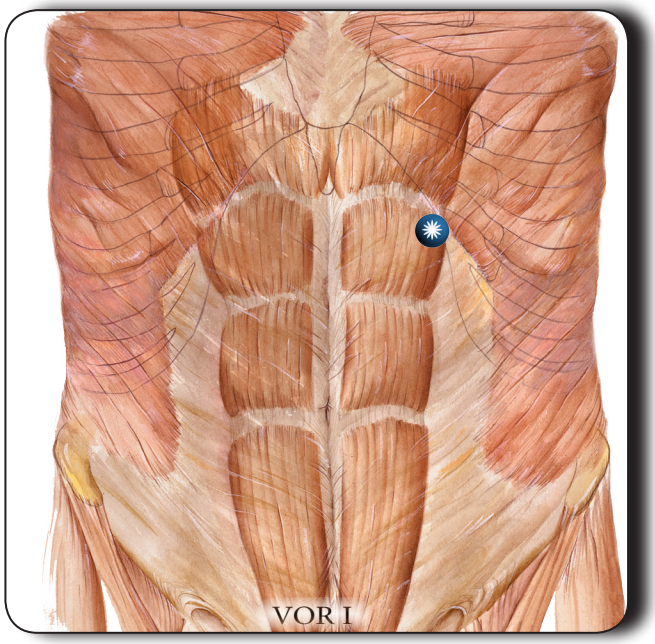
NUTRIENT SOURCE:
1. Ferrofood (S)



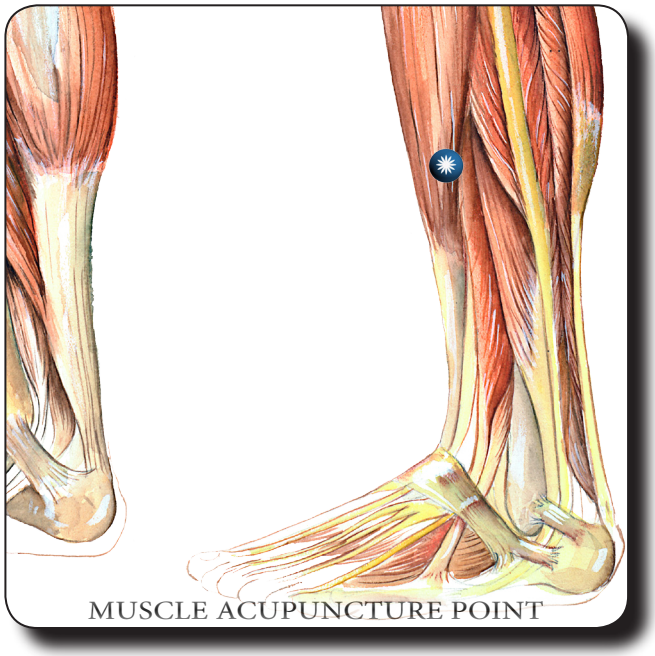

INTEROSSEI DORSALES MANUS

NEUROVASCULAR


NEUROLYMPHATIC


VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 566: INTEROSSEI DORSALES MANUS, (Third Division)

ORIGIN: Ulnar surface of 3rd metacarpal and radial surface of 4th metacarpal.

INSERTION: Base of proximal phalanx of 3rd finger on ulnar side, and aponeurosis of tendon of Extensor Digitorum Communis to 3rd finger.

ACTION: Extends and abducts middle finger as a whole toward little finger.

TEST:

Patient: Supine. Pronate forearm on arm. Extend and abduct middle finger as a whole toward little finger.

Doctor: Position: Ipsilateral.
Brace: All other fingers on dorsum surface.
Contact: Ulnar surface of middle finger to adduct toward midline.

NEUROVASCULAR: (Ant/BL) Frontal bone, lateral aspect, superior to supraciliary ridge near junction with zygoma.

NEUROLYMPHATIC: (Ant/R) 3rd ICS, 5" lateral to sternum.

VISCERAL ORGAN:

I. *Pancreatic Duct System:* (Ant/L) Rectus Abdominis, 3rd section, lateral border near ribs.

II. *Esophagus:* (Ant/BL) Junction of xiphoid and gladiolus, lateral aspect.

M. A. P. : St38.5

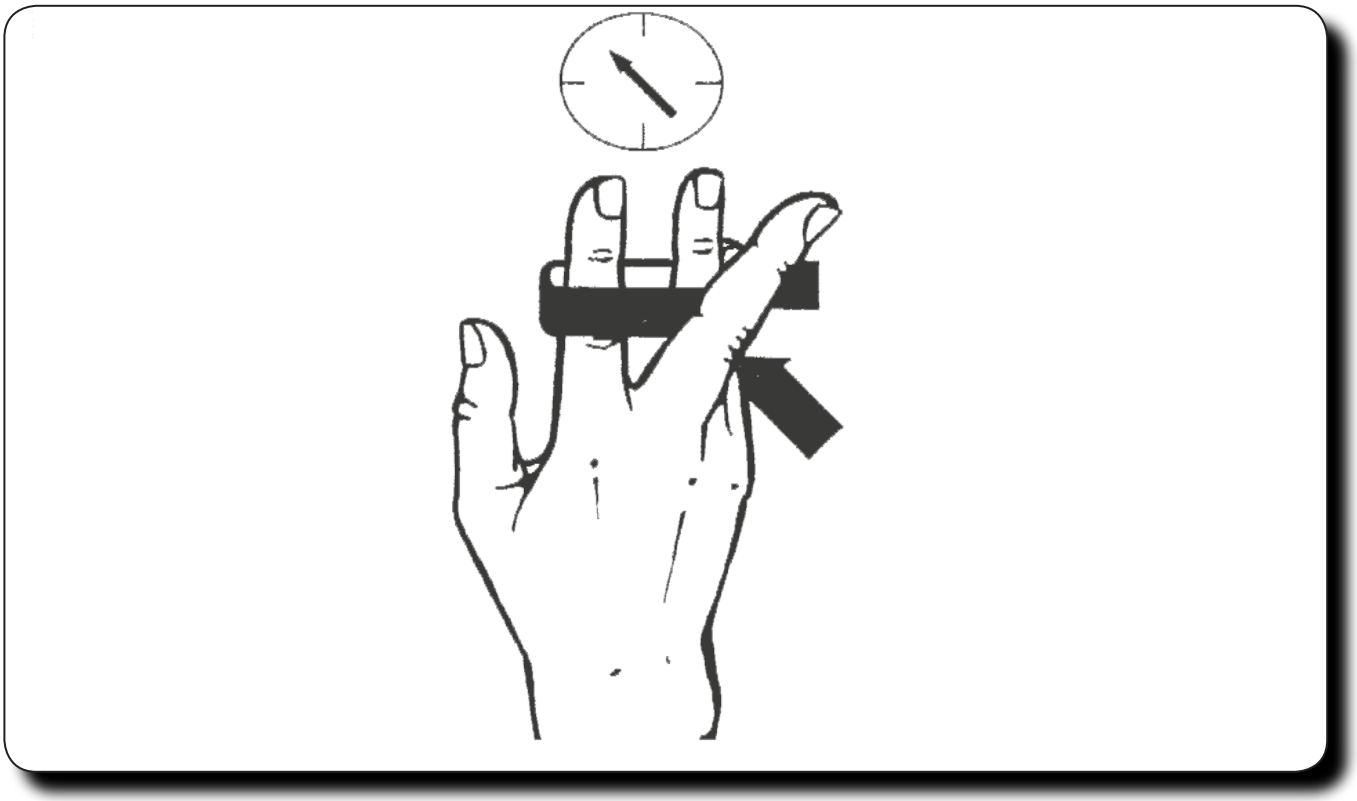
V.L. : T7R

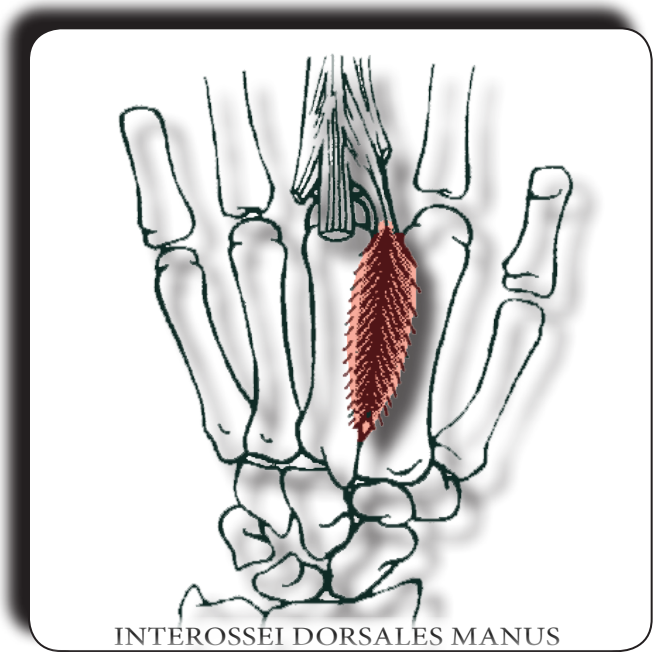
L. B. V.L. : T4R
M. M. : T1

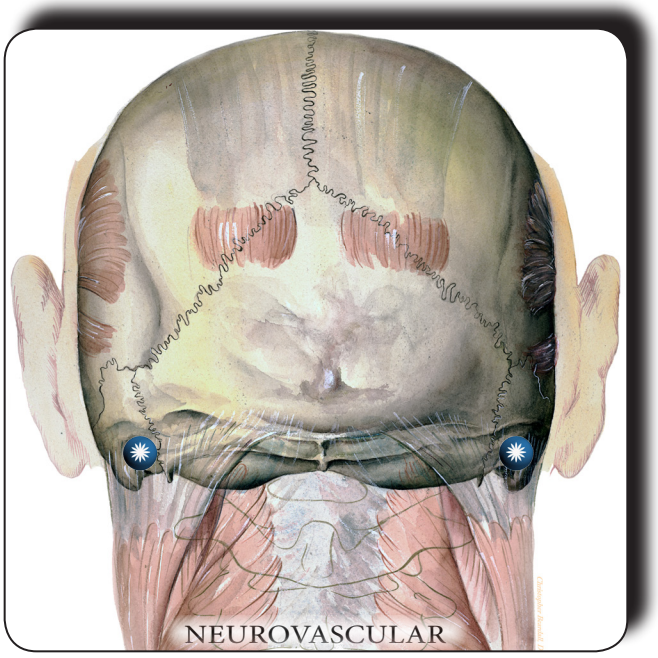
CRANIAL: Zygoma

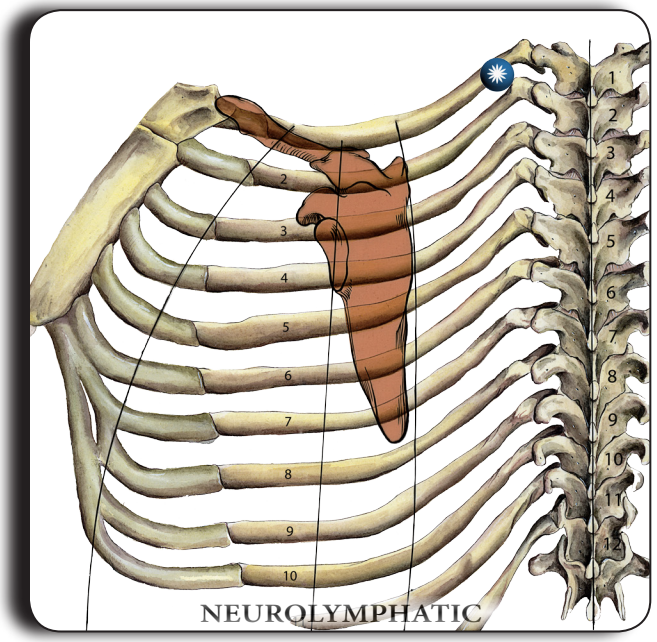
FOOT: 3rd Metatarsal

NUTRIENT SOURCE:
1. Complex F, dry (S)
2. Cardio + (S)




INTEROSSEI DORSALES MANUS


NEUROVASCULAR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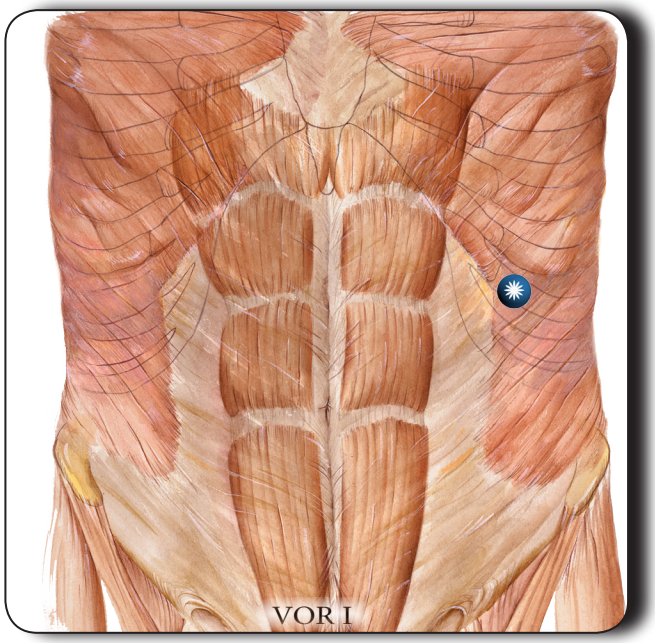
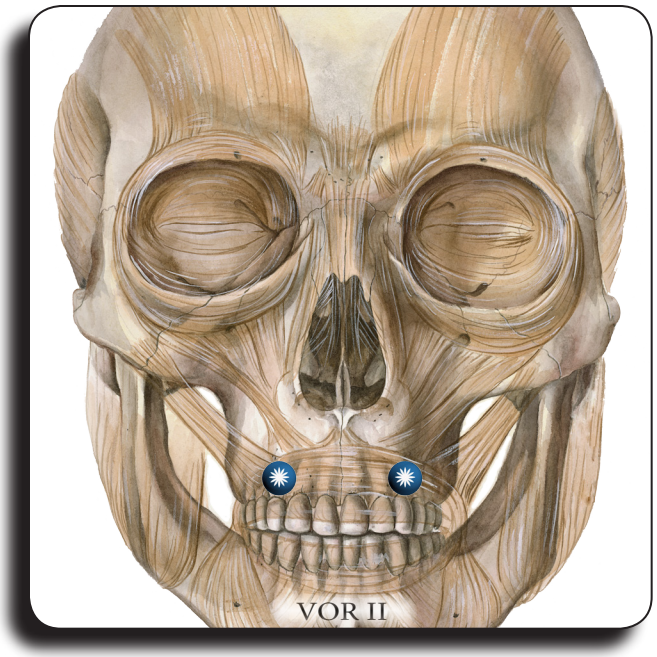
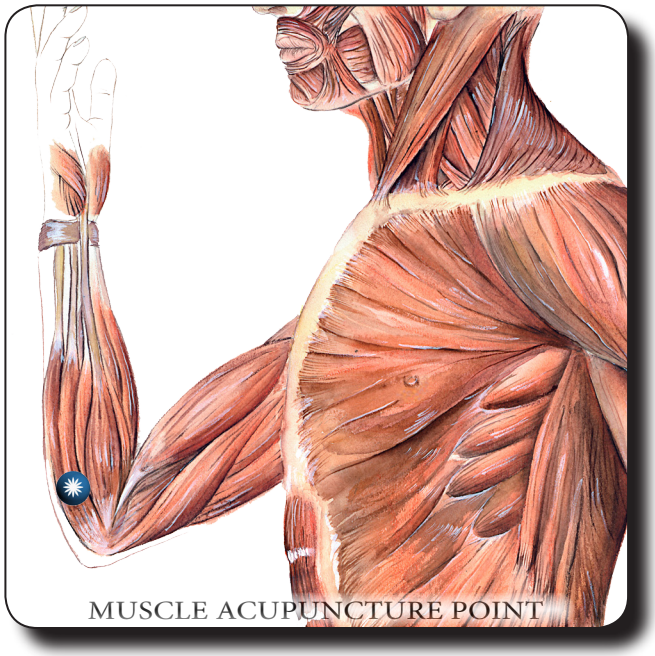
NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 568: INTEROSSEI DORSALES MANUS, (Second Division)

ORIGIN: Bipenate muscle arising from the radial side of the 3rd metacarpal and the ulnar side of the 2nd metacarpal, dorsum aspect.

INSERTION: Base of the proximal phalanx of the middle finger on its radial aspect and to the tendon of Extensor Digitorum Communis.

ACTION: Extends and abducts middle finger as a whole toward thumb.

TEST:

Patient: Supine. Pronate forearm on arm. Place all fingers on a surface and extend and abduct middle finger toward thumb.

Doctor: Position: Ipsilateral.
Brace: All other fingers on dorsum surface.
Contact: Radial surface of middle finger to adduct toward midline.

NEUROVASCULAR: (Post/BL) Temporal bone, posterior aspect, mastoid process, 1/2" superior to the tip.

NEUROLYMPHATIC: (Post/L) 1st ICS, 2" lateral from spine .

VISCERAL ORGAN:

I. *Spleen:* (Ant/L) 8th costocartilage junction, Sp16.4.

II. *Sinuses - Frontal:* (Ant/BL) Maxillary bone, anterior aspect, just superior to canine tooth.

M. A. P. : Si7.5

V.L. : T6R

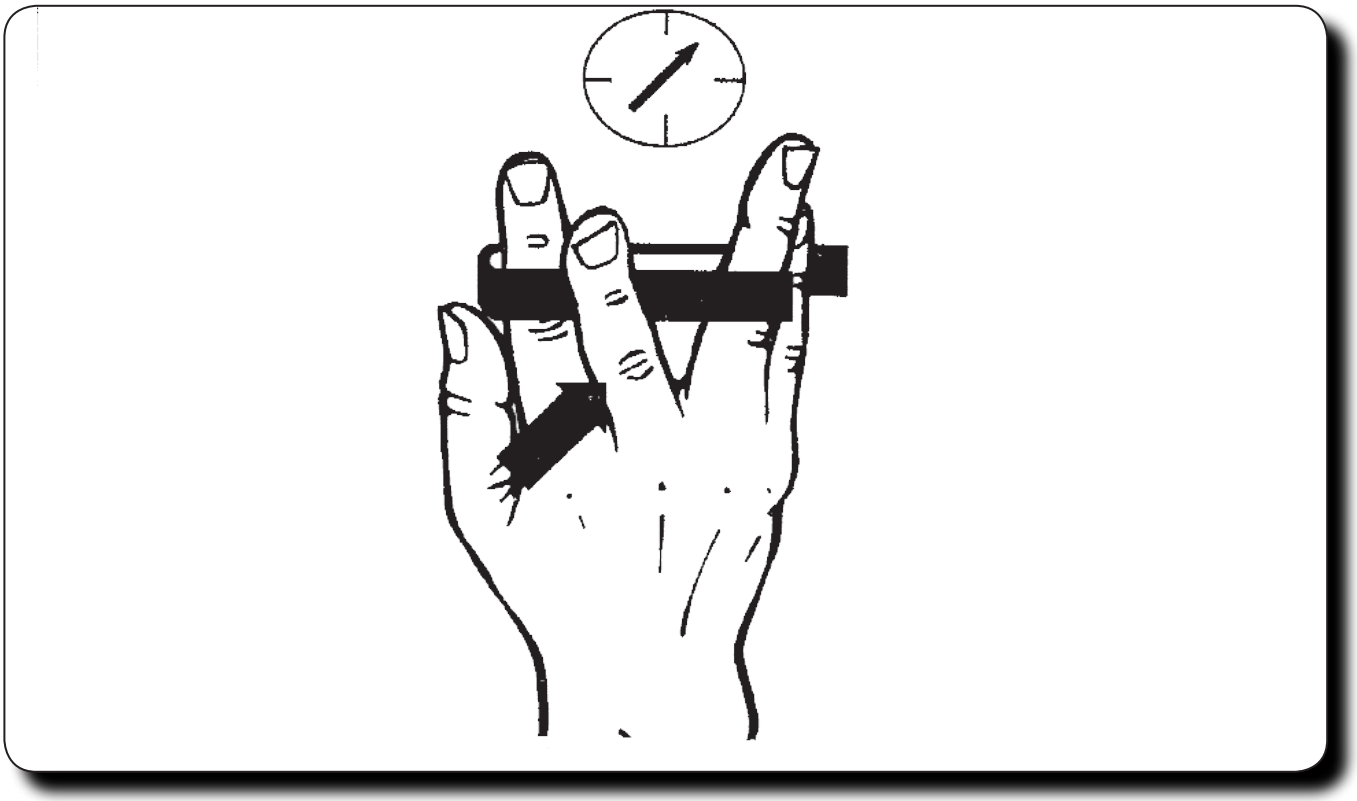
L. B. V.L. : T5R

M. M. : T1

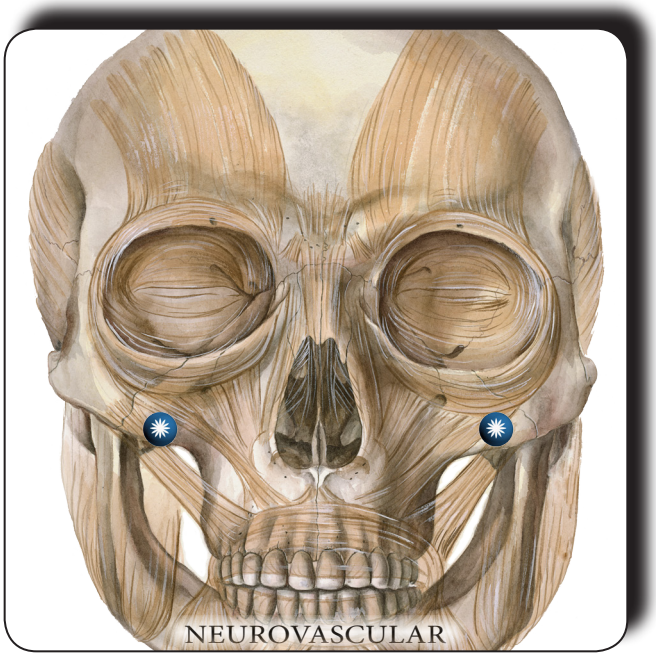
CRANIAL: Sphenoid

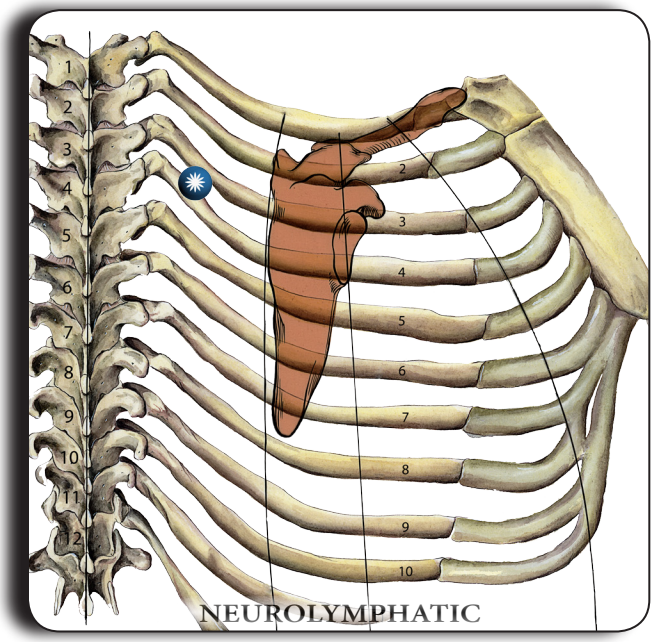
FOOT: 3rd Metatarsal

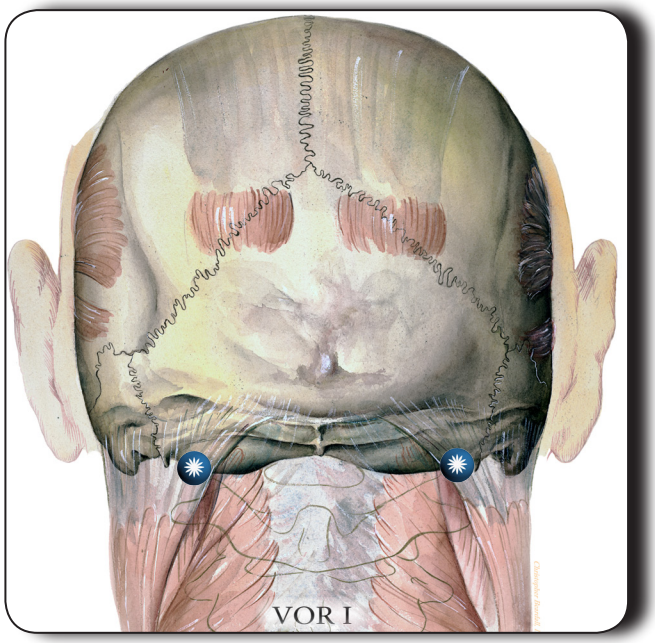
NUTRIENT SOURCE:
1. CyroYeast (S)

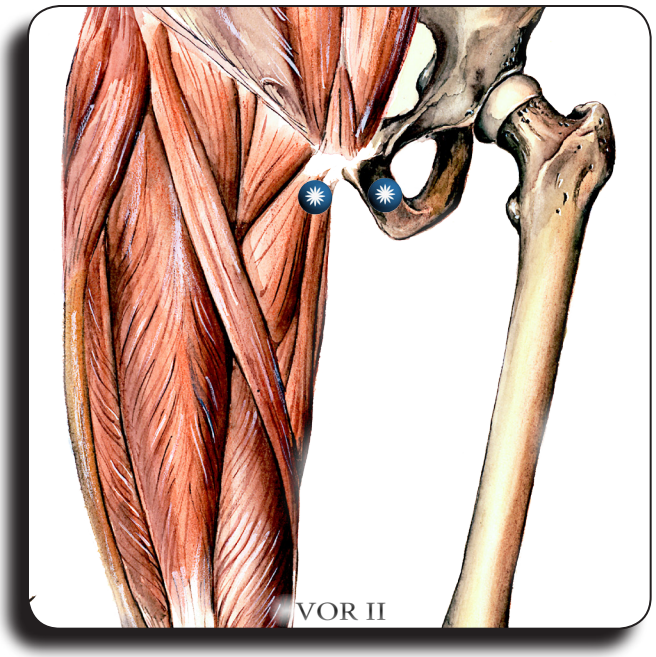


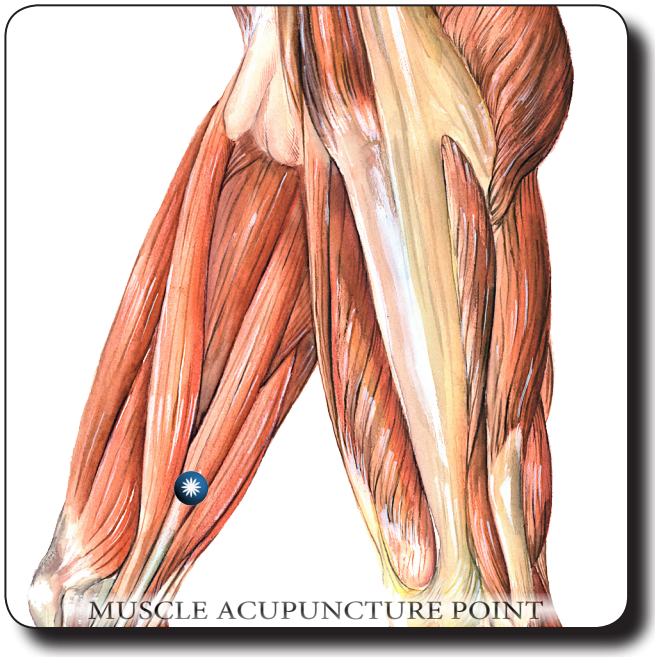
INTEROSSEI DORSALES MANUS


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 570: INTEROSSEI DORSALES MANUS, (First Division)

ORIGIN: Bipenate muscle, lateral head, arising from proximal half of the ulnar border of the 1st metacarpal, medial head. Entire length of the radial border of the 2nd metacarpal.

INSERTION: Radial side of the index finger and digital expansion.

ACTION: Abducts the index finger away from midline of hand (line draws through the axis of the middle finger).

TEST:

Patient: Abduct and extend index finger.

Doctor: Position: Ipsilateral.
Brace: The middle, ring and little fingers.
Contact: The lateral aspect of the middle phalanx of the index to adduct toward midline of the hand.

NEUROVASCULAR: (Ant/BL) Maxillary bone, anterior lateral aspect, just medial to zygomatic-maxillary suture.

NEUROLYMPHATIC: (Post/R) 3rd ICS, 3" lateral to the spine.

VISCERAL ORGAN:

I. *Anterior Pituitary:* (Post/BL) Occipital bone, G20, near transverse of atlas.

II. *Bladder*: (Ant/BL) Pelvis, Pubic area, inferior ramus.

M. A. P. : Lv9

V.L. : T10L

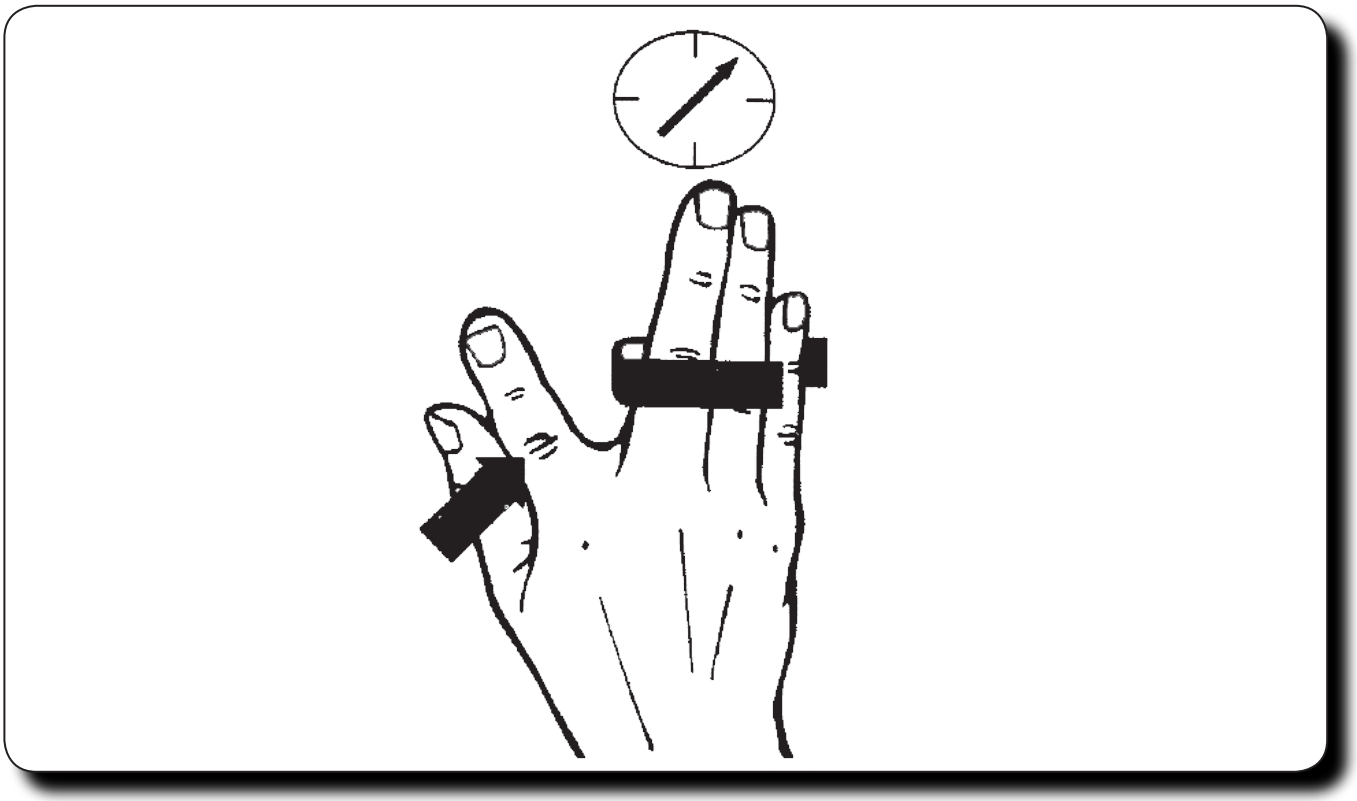
L. B. V.L. : T1L

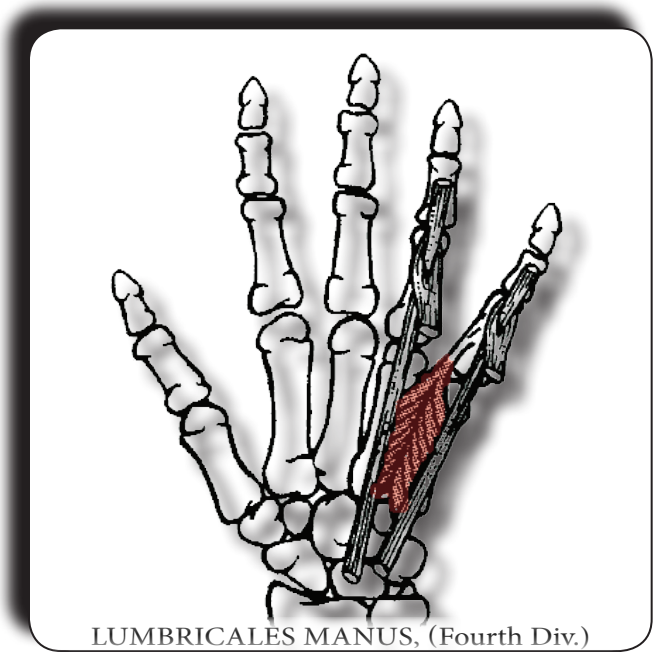
M. M. : T1

CRANIAL: Zygoma

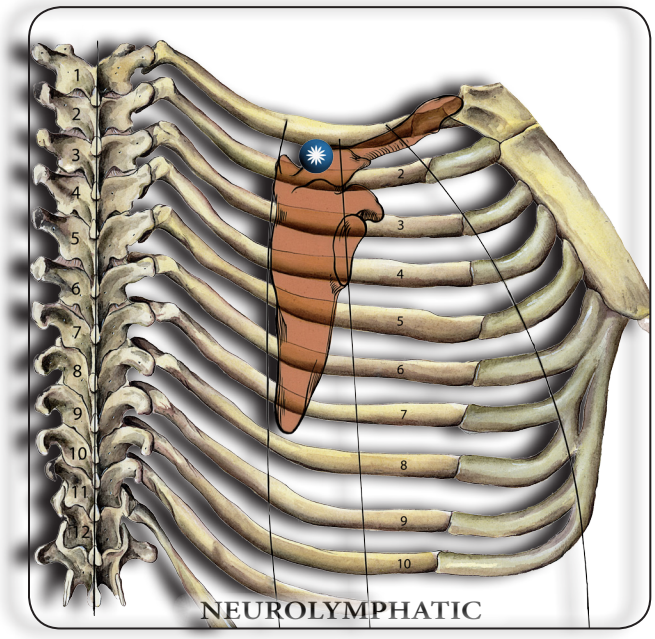
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. Complex G (S)

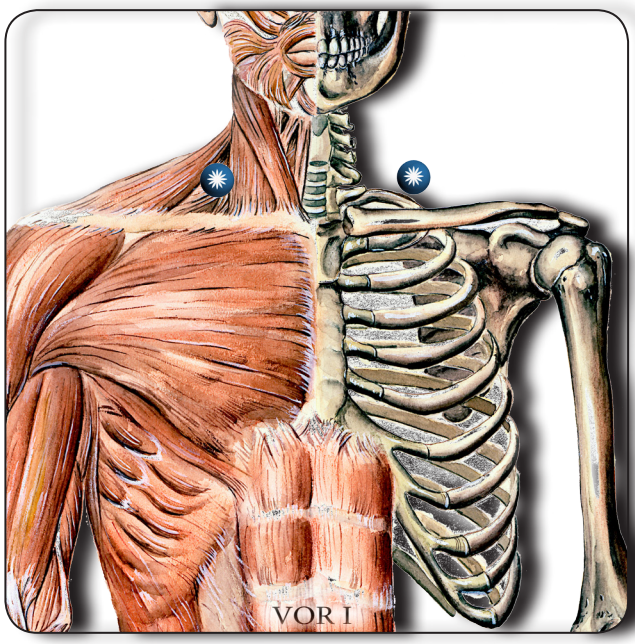



LUMBRICALES MANUS, (Fourth Div.)

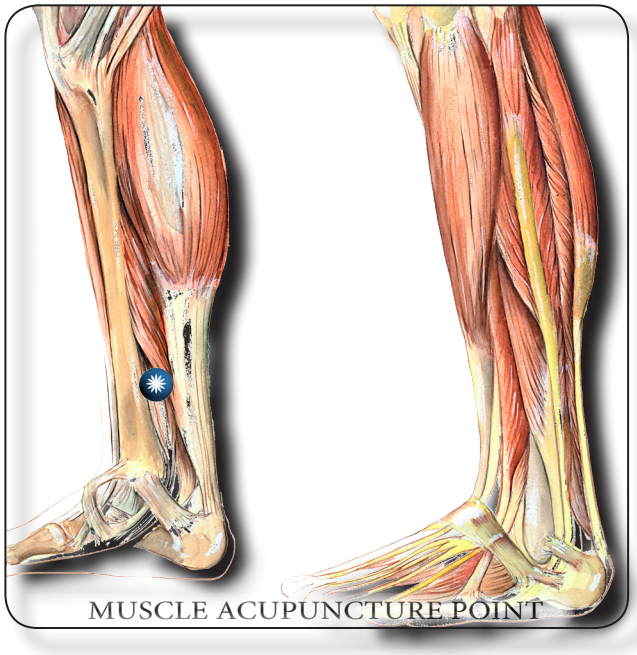
NEUROVASCULAR



NEUROLYMPHATIC


VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 572: LUMBRICALES MANUS, (Fourth Division)

ORIGIN: From tendons of Flexor Digitorum Profundus of the ring and little finger.

INSERTION: Into tendinous expansions of the Extensor Digitorum Communis.

ACTION: Flexes the 5th metacarpophalangeal joint while extending the two distal phalanges.

TEST:

Patient: Flex the 5th metacarpophalangeal joint while extending the two distal phalanges.

Doctor: Position: Ipsilateral.
Brace: Dorsum and palmar surfaces of distal and middle phalanges.
Contact: Palmar surface of 5th metacarpal to extend the metacarpophalangeal joint through sagittal plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, 1" superior to glabella and 1/2" lateral to midline.

NEUROLYMPHATIC: (Lat/R) 1st ICS, midaxillary area.

VISCERAL ORGAN:

I. *Nose:* (Ant/BL) Neck, anterior aspect, belly of Omohyoideus muscle, located superior to clavicle, anterior and medial to Trapezius.

II. *Lymphatics - colon:* (Ant/BL) Abdomen at the level of the crest of ilium, 1" medial to ASIS.

M. A. P. : K8

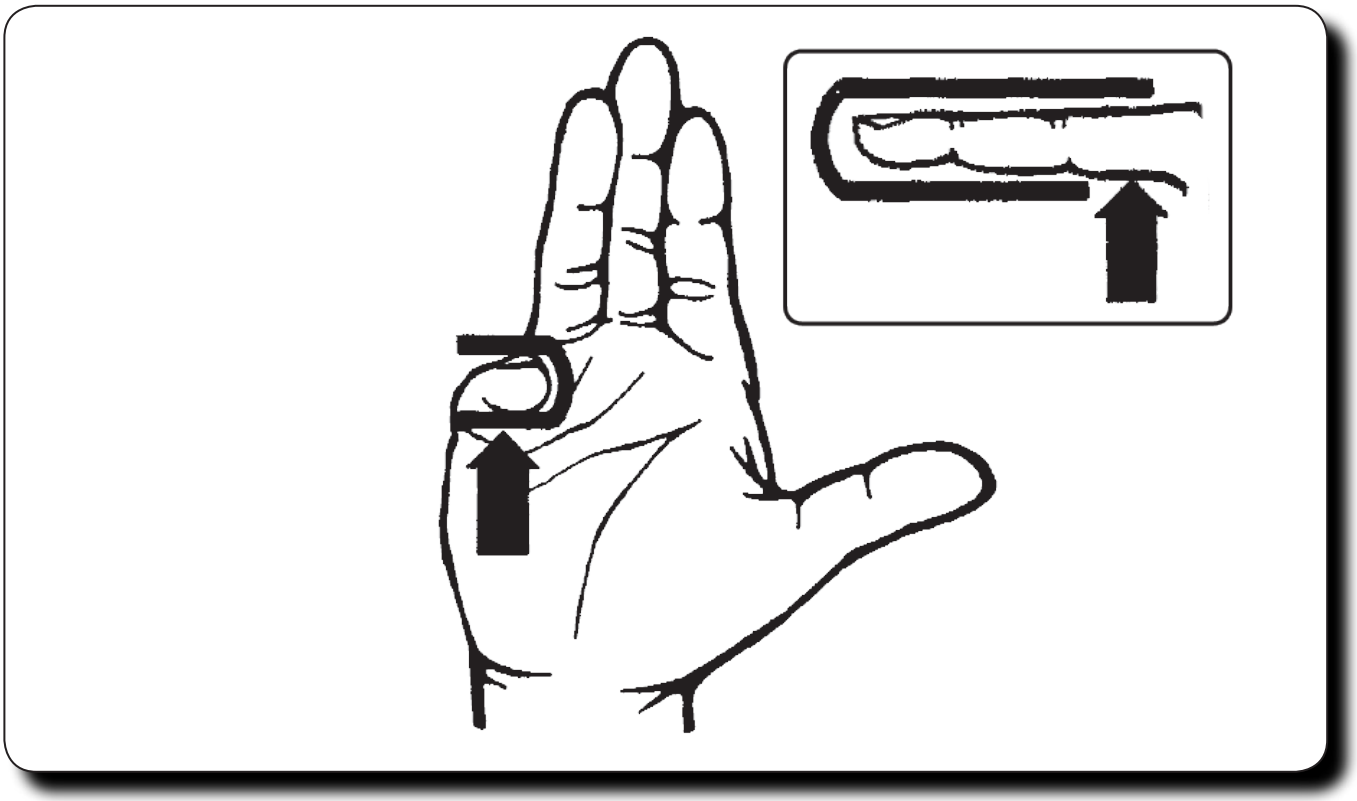
V.L. : C6L
L. B. V.L. : T12L

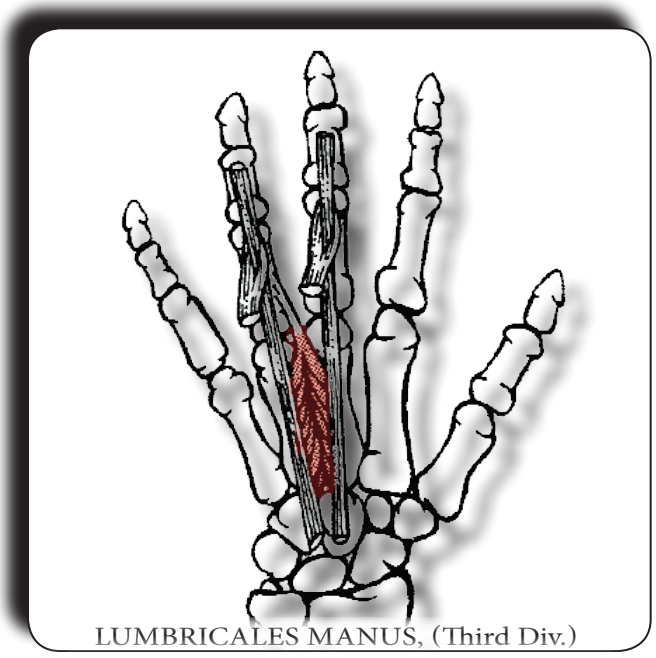
M. M. : C8

CRANIAL: Ethmoid

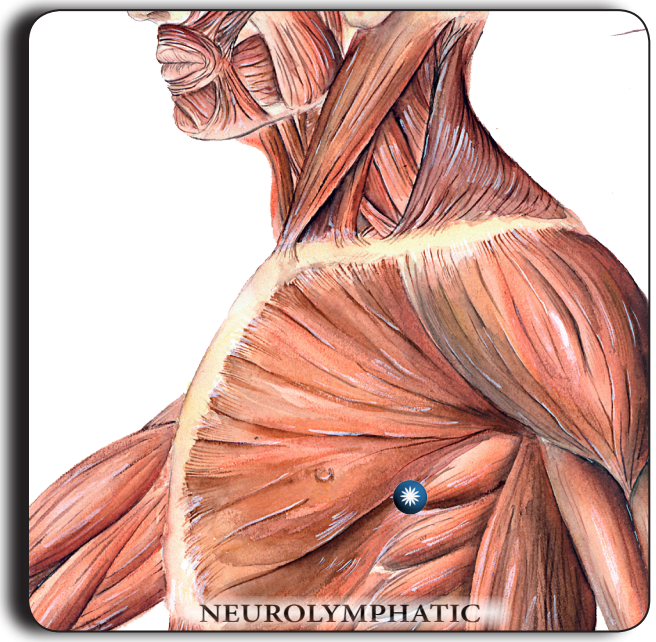
FOOT: 1st Cuneiform

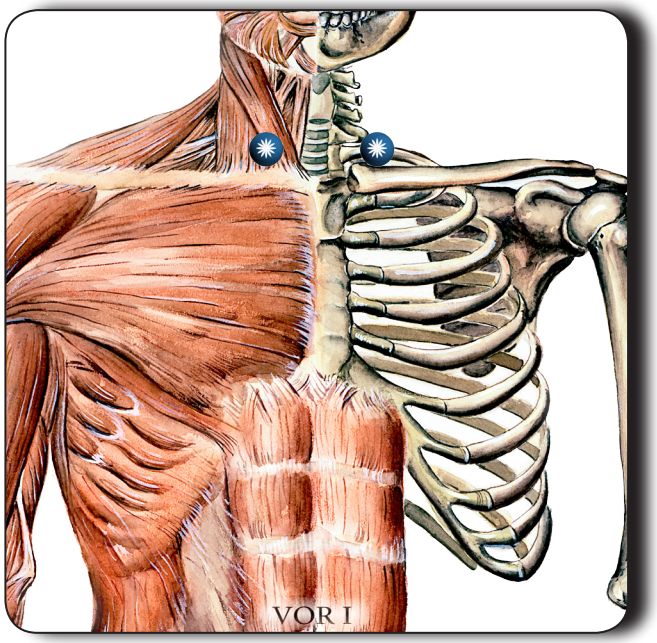
NUTRIENT SOURCE:
1. Super EFF (S)

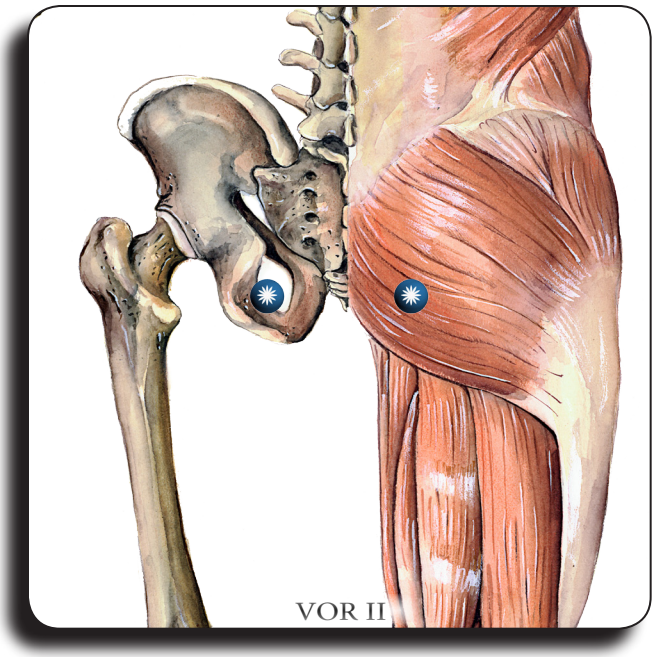


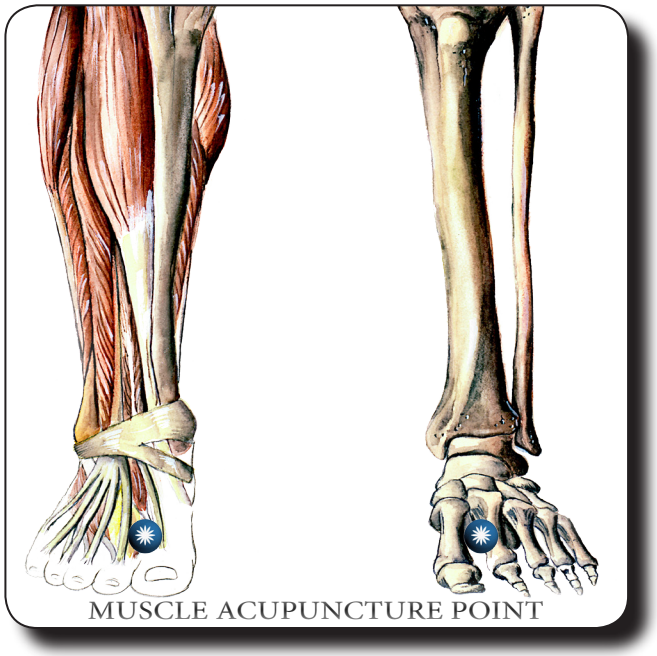

LUMBRICALES MANUS, (Third Div.)

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 574: LUMBRICALES MANUS, (Third Division)

ORIGIN: Tendons of Flexor Digitorum Profundus to the 3rd and 4th fingers.

INSERTION: Tendinous expansion of Extensor Digitorum Communis of ring finger.

ACTION: Flexes, maintains extension of last two phalanges and slightly abducts 1st phalanx of ring finger.

TEST:

Patient: Supine. Supinate forearm on arm. Flex and slightly abduct 1st phalanx of ring finger while maintaining extension of last two phalanges.

Doctor: Position: Ipsilateral.
Brace: Dorsum and palmar surfaces of distal and middle phalanges.
Contact: Palmar aspect of ring finger to extend through sagittal plane .

NEUROVASCULAR: (Ant/BL) Zygomatic bone, anterior inferior aspect, lateral to maxillary-zygomatic suture.

NEUROLYMPHATIC: (Lat/L) 3rd ICS, lateral border of Pectoralis Major.

VISCERAL ORGAN:

I. *Parathyroid:* (Ant/BL) Neck, anterior aspect, medial inferior aspect of SCM, 1" above sternal notch.

II. *Lymphatics of anal canal:* (Post/BL) Pelvis, posterior aspect, belly of Gluteus Maximus, 2" lateral to coccyx.

M. A. P. : Lv2.5

V.L. : L3L

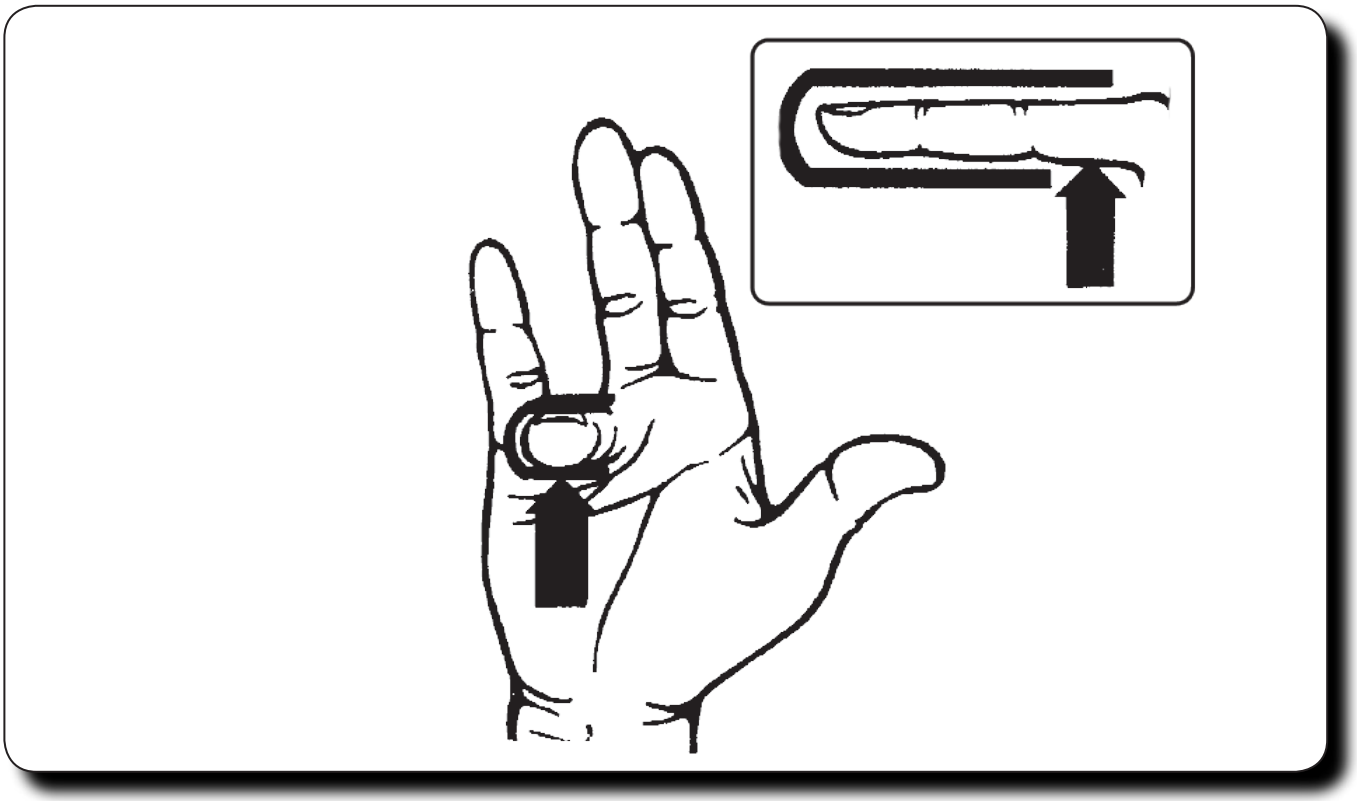
L. B. V.L. : C3L

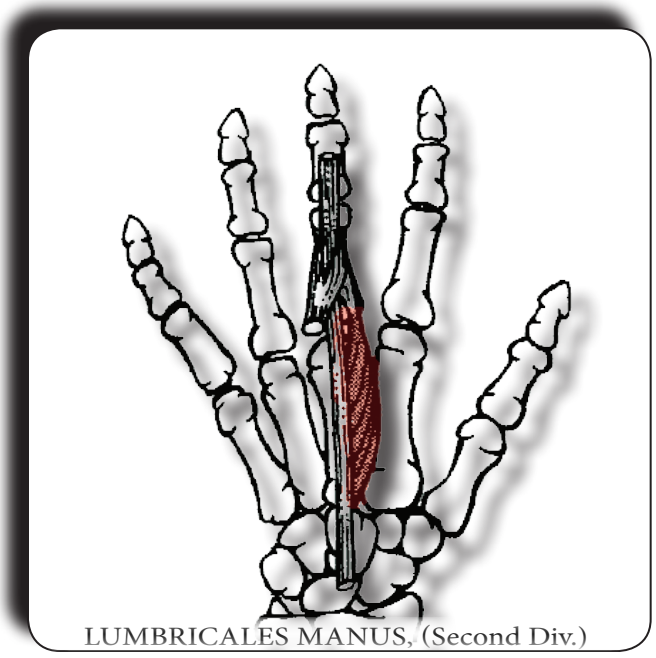
M. M. : T2

CRANIAL: Frontal

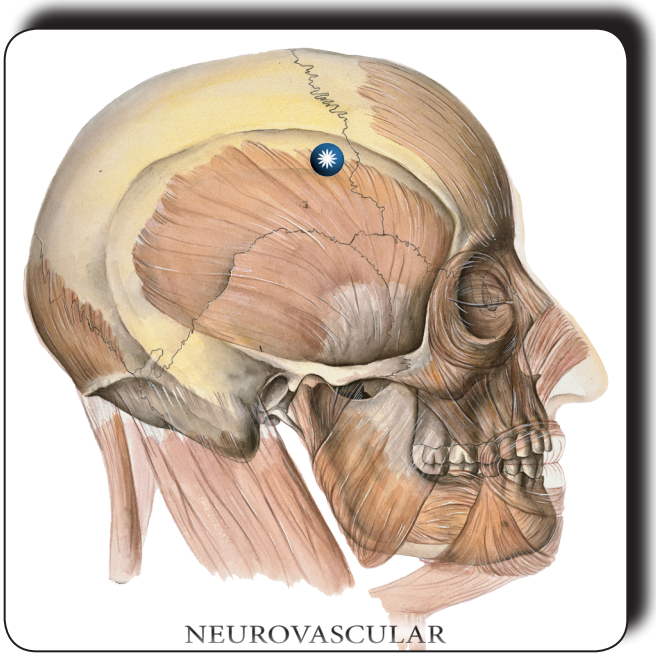
FOOT: Navicular

NUTRIENT SOURCE:
1. Bludpur (VH)

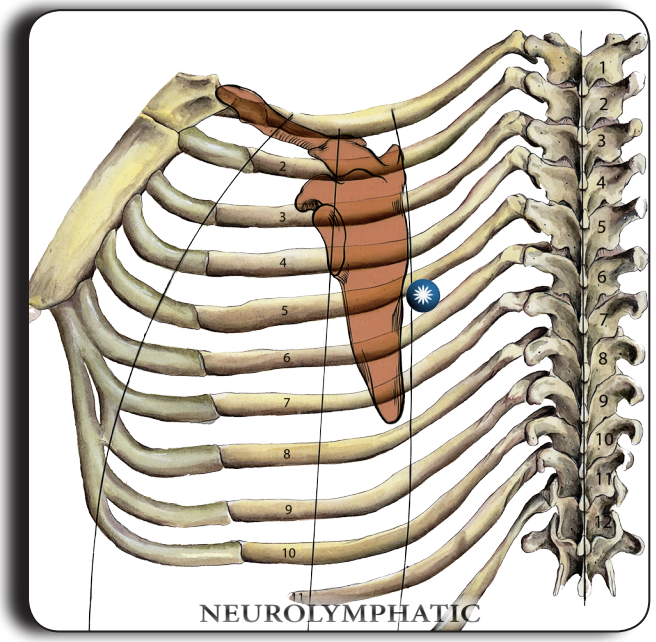




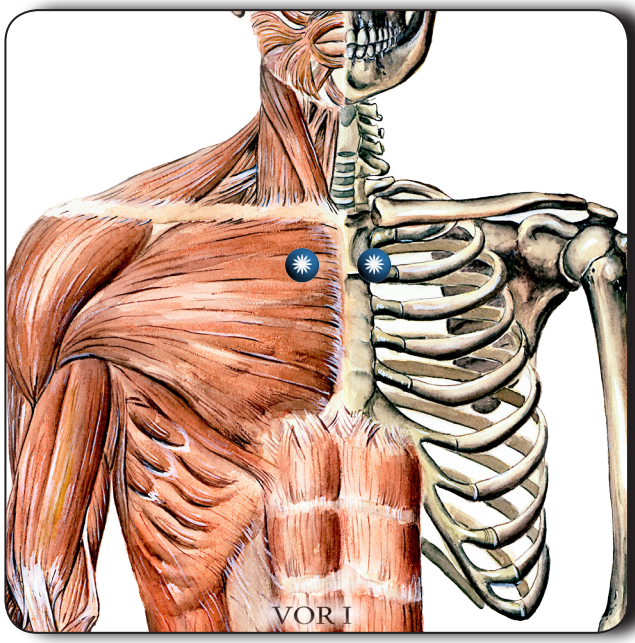
LUMBRICALES MANUS, (Second Div.)



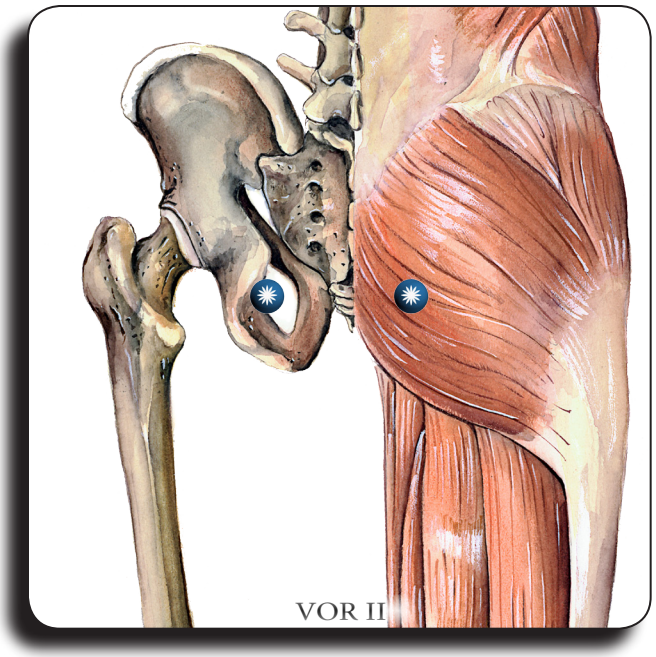
NEUROVASCULAR



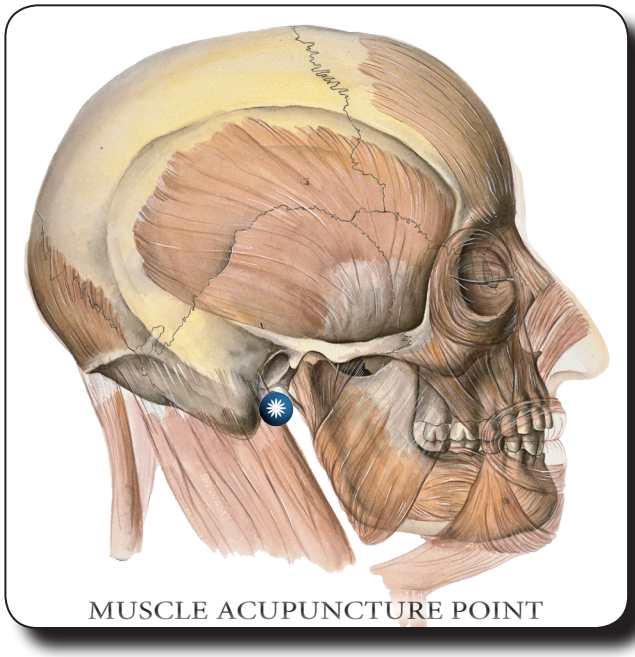
NEUROLYMPHATIC



VOR I



VOR II



MUSCLE ACUPUNCTURE POINT

Muscle 576: LUMBRICALES MANUS, (Second Division)

ORIGIN: Radial side and anterior surface of tendons of Flexor Digitorum Profundus to index and middle fingers.

INSERTION: Tendinous expansions of Extensor Digitorum Communis of middle finger.

ACTION: Flexes, maintains extension of two distal phalanges and slightly abducts 1st phalanx of middle finger.

TEST:

Patient: Supine. Supinate forearm on arm. Flex and slightly abduct 1st phalanx of middle finger. Maintain extension of last two phalanges

Doctor: Position: Ipsilateral.
Brace: Dorsum and palmar surfaces of distal and middle phalanges.
Contact: Palmar aspect of middle finger to extend through sagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, lateral aspect, 4" superior to EAC and 1" anterior, below superior temporal line.

NEUROLYMPHATIC: (Post/L) 5th ICS near vertebral border of scapula.

VISCERAL ORGAN:

I. *Parathyroid:* (Ant/BL) Ribcage, anterior aspect, junction of sternum and 2nd rib.

II. *Seminal Vesicles:* (Post/BL) Pelvis, posterior aspect, Gluteus Maximus belly, 1" below B30 and 1/2" lateral.

M. A. P. : Tw17

V.L. : T7L

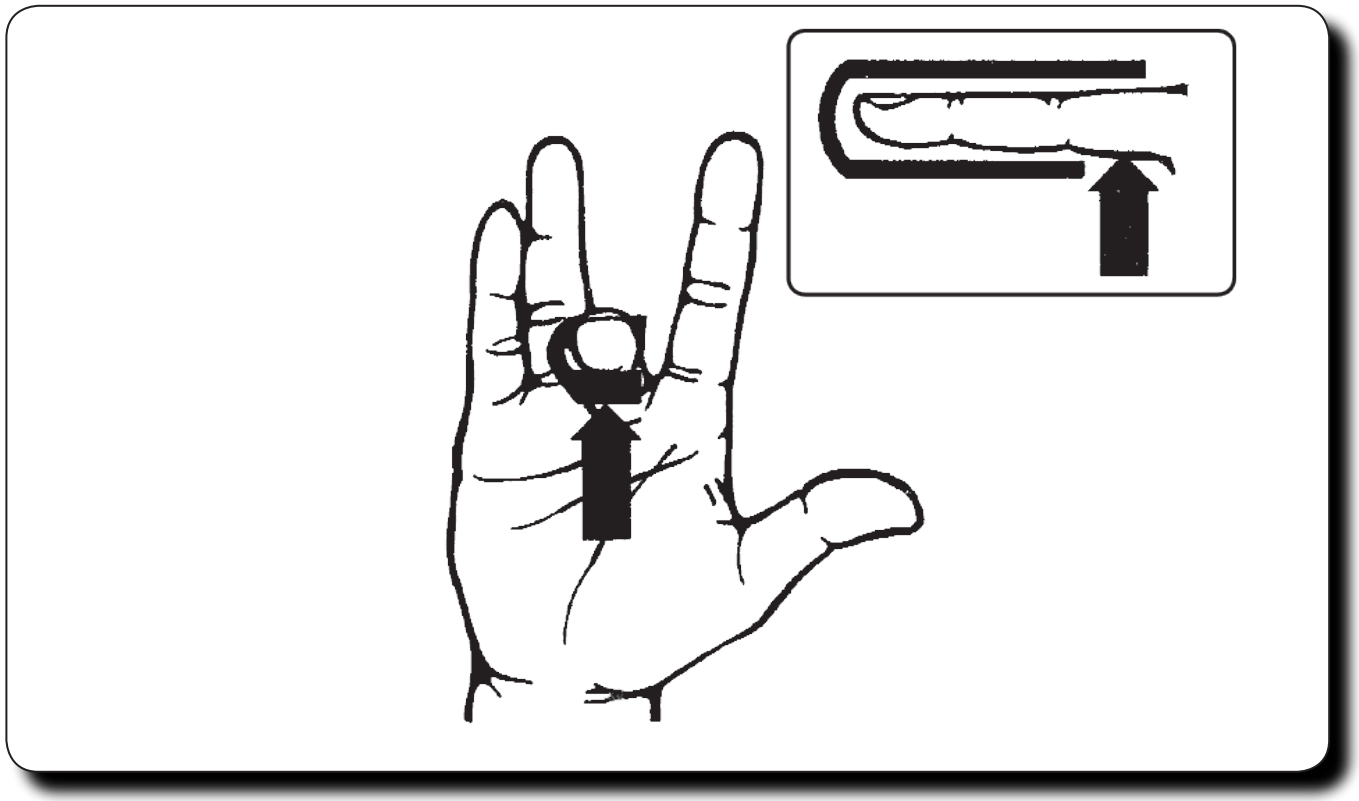
L. B. V.L. : T4L

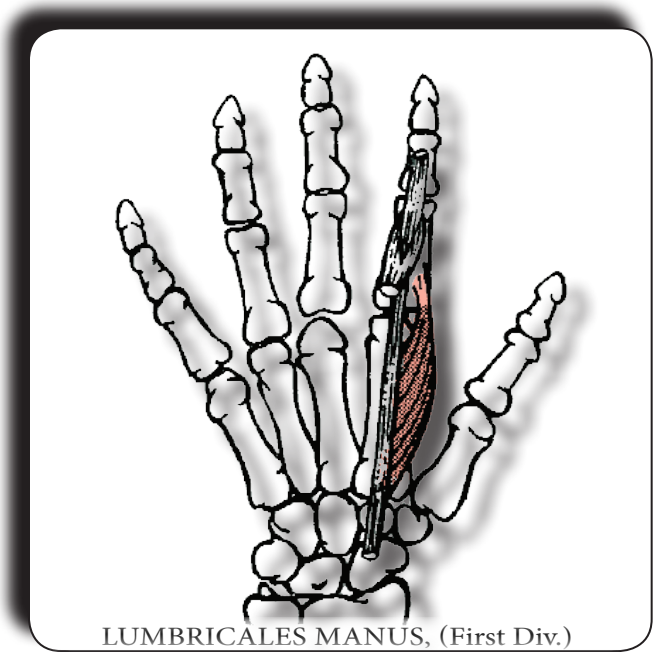
M. M. : T2

CRANIAL: Sphenoid

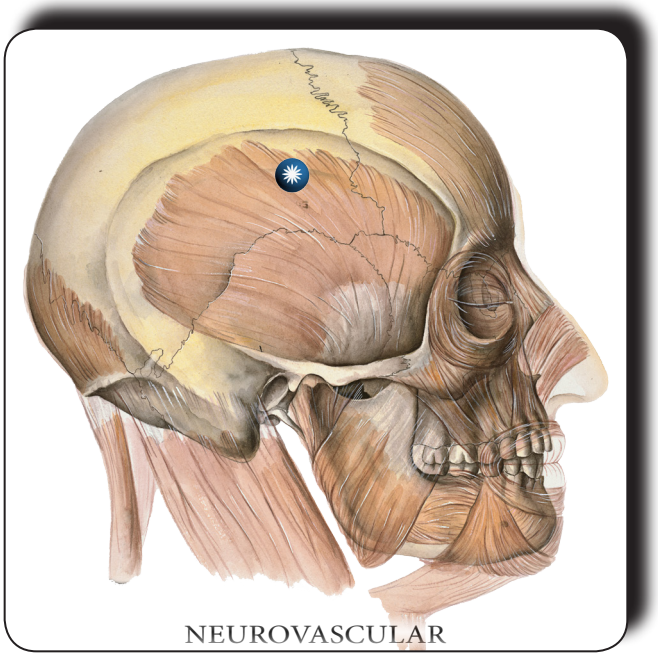
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. B6 with Niacinamide (S)

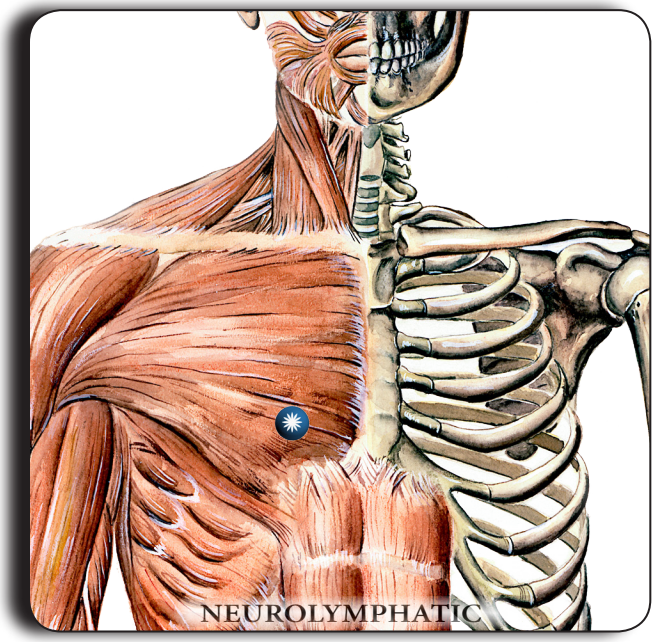




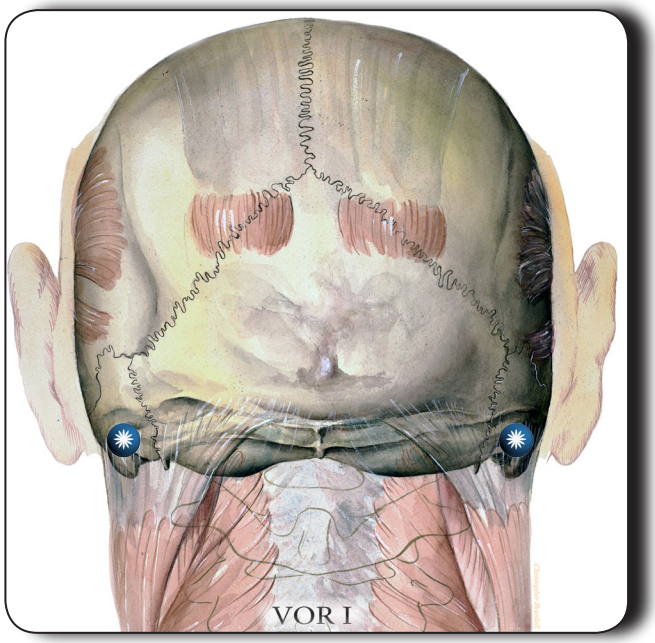
LUMBRICALES MANUS, (First Div.)



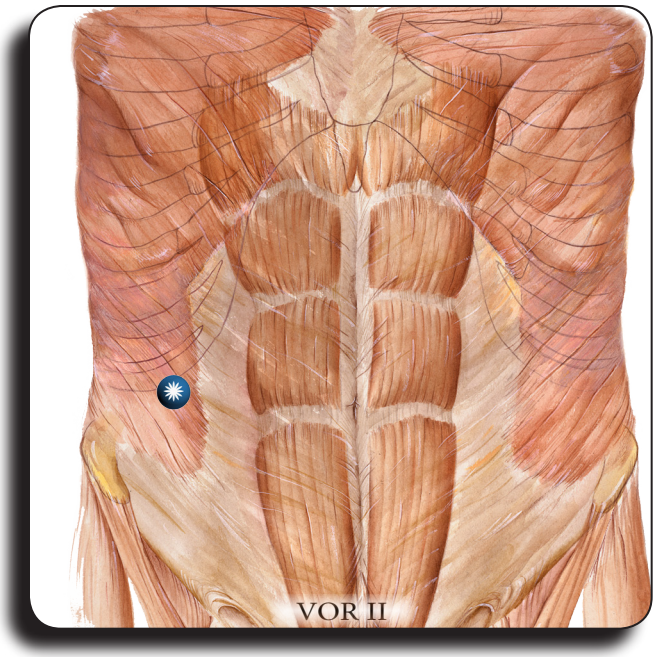
NEUROVASCULAR



NEUROLYMPHATIC



VOR I



VOR II

MUSCLE ACUPUNCTURE POINT

Muscle 578: LUMBRICALES MANUS, (First Division)

ORIGIN: Radial and anterior surface of the tendon to the index finger of the Flexor Digitorum Profundus.

INSERTION: Tendinous expansions of Extensor Digitorum Communis of the index finger.

ACTION: Flexes, maintains extension of two distal phalanges and abducts the 1st phalanx of index finger.

TEST:

Patient: Supine. Supinate forearm on arm. Flex and slightly abduct 1st phalanx of index finger. Maintain extension of last two phalanges

Doctor: Position: Ipsilateral.
Brace: Dorsum and palmar surfaces of distal and middle phalanges.
Contact: Palmar aspect of index finger to extend through sagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, lateral aspect, directly above EAC, just below superior temporal line.

NEUROLYMPHATIC: (Ant/R) 5th ICS at costocartilage junction.

VISCERAL ORGAN:

I. *Posterior Pituitary:* (Post/BL) Temporal Bone, posterior inferior aspect of Mastoid near occipitomastoid suture.

II. *Liver:* (Ant/R) Ribcage, anterior aspect, 10th rib, costocartilage Junction.

M. A. P. : Gv23

V.L. : C2L

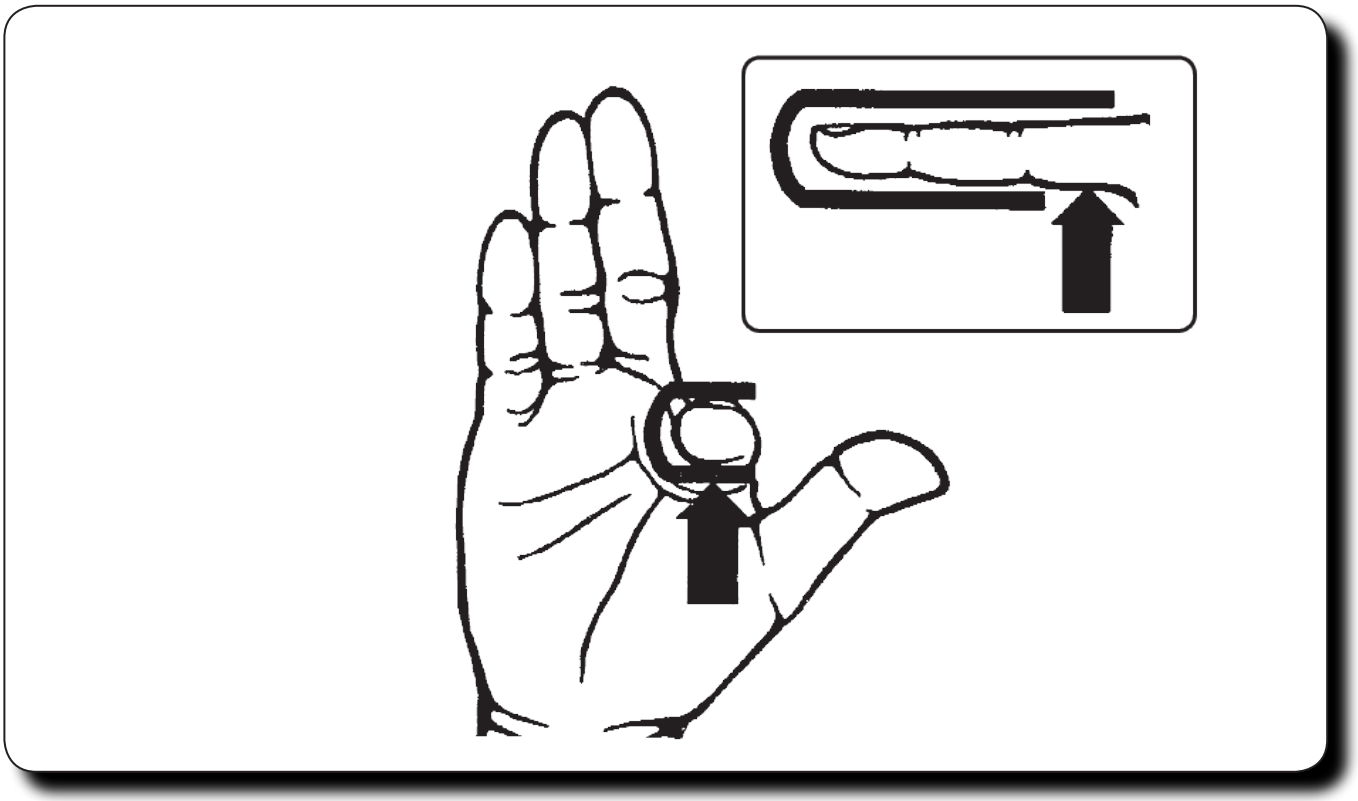
L. B. V.L. : L4L

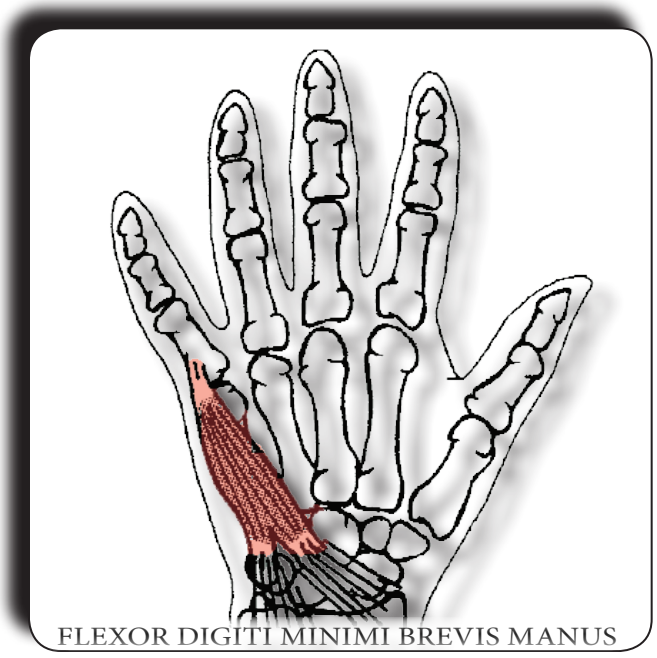
M. M. : T2

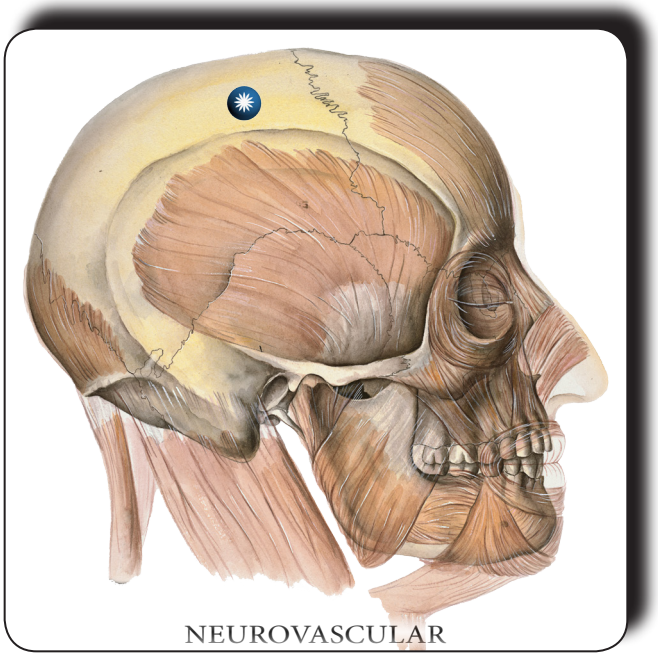
CRANIAL: Maxillary

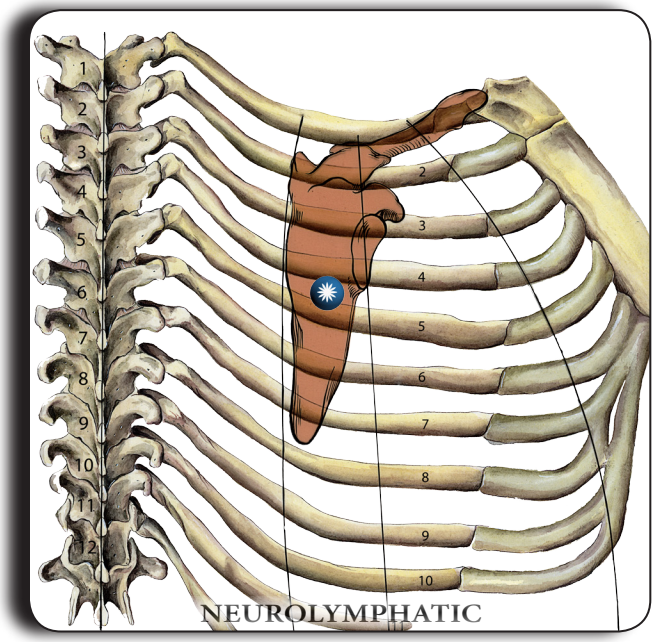
FOOT: 3rd Cuneiform

NUTRIENT SOURCE:
1. Fortil B12 (S)



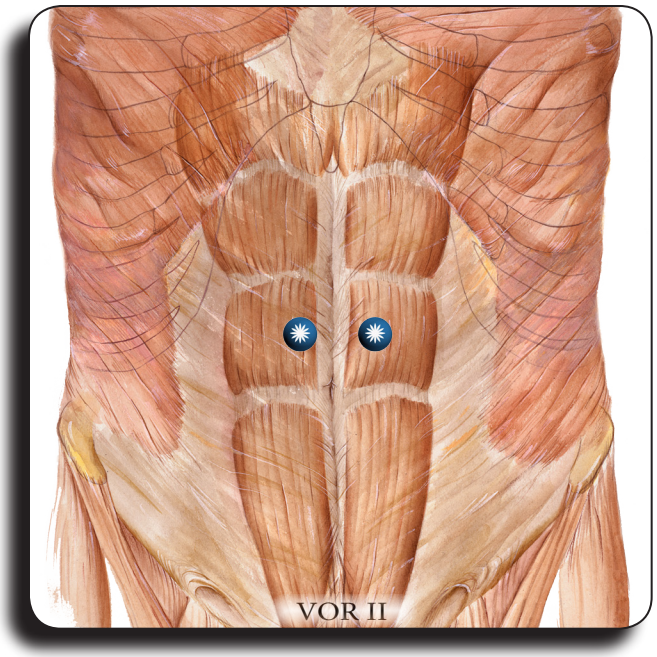

FLEXOR DIGITI MINIMI BREVIS MANUS

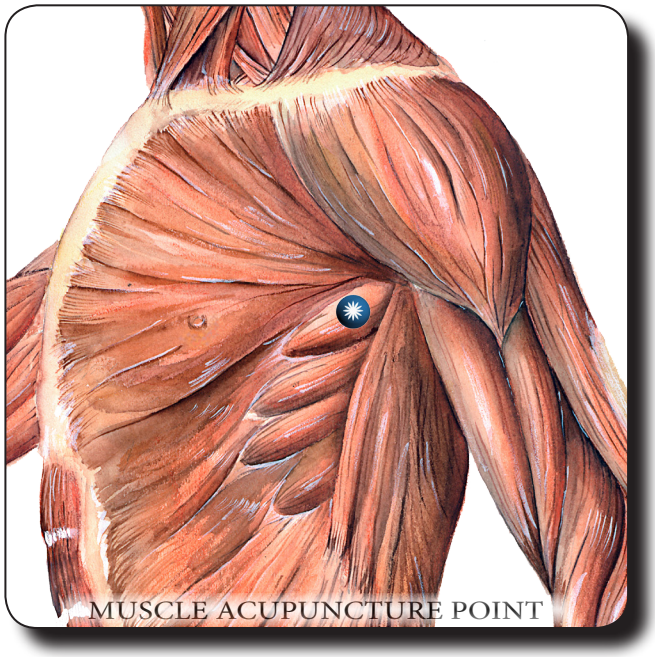

NEUROVASCULAR



NEUROLYMPHATIC

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 580: FLEXOR DIGITI MINIMI BREVIS MANUS

ORIGIN: Convex surface of the hamulus of the hamate bone and transverse carpal ligament.

INSERTION: Ulnar side of the base of the 1st phalanx of little finger.

ACTION: Flexes 1st phalanx of little finger.

TEST:

Patient: Supinate hand. Flex 1st phalanx of little finger while extending the 2nd and 3rd phalanx.

Doctor: Position: Ipsilateral.
Brace: Dorsal surface of 5th metacarpal.
Contact: 1st phalanx and extend through sagittal plane.

NEUROVASCULAR: (Lat) Parietal bone, lateral aspect, just superior to superior temporal line and posterior to ear.

NEUROLYMPHATIC: (Lat/R) 4th ICS, midaxillary area.

VISCERAL ORGAN:

I. *Pancreas - Sugar:* (Ant/BL) Abdomen, Sp15, level of umbilicus.

II. *Lymphatics - Common hepatic duct:* (Ant/BL) Rectus Abdominis, 2nd section, 1 - 2" superior to umbilicus, 1/2" lateral.

M. A. P. : G22

V.L. : L1L

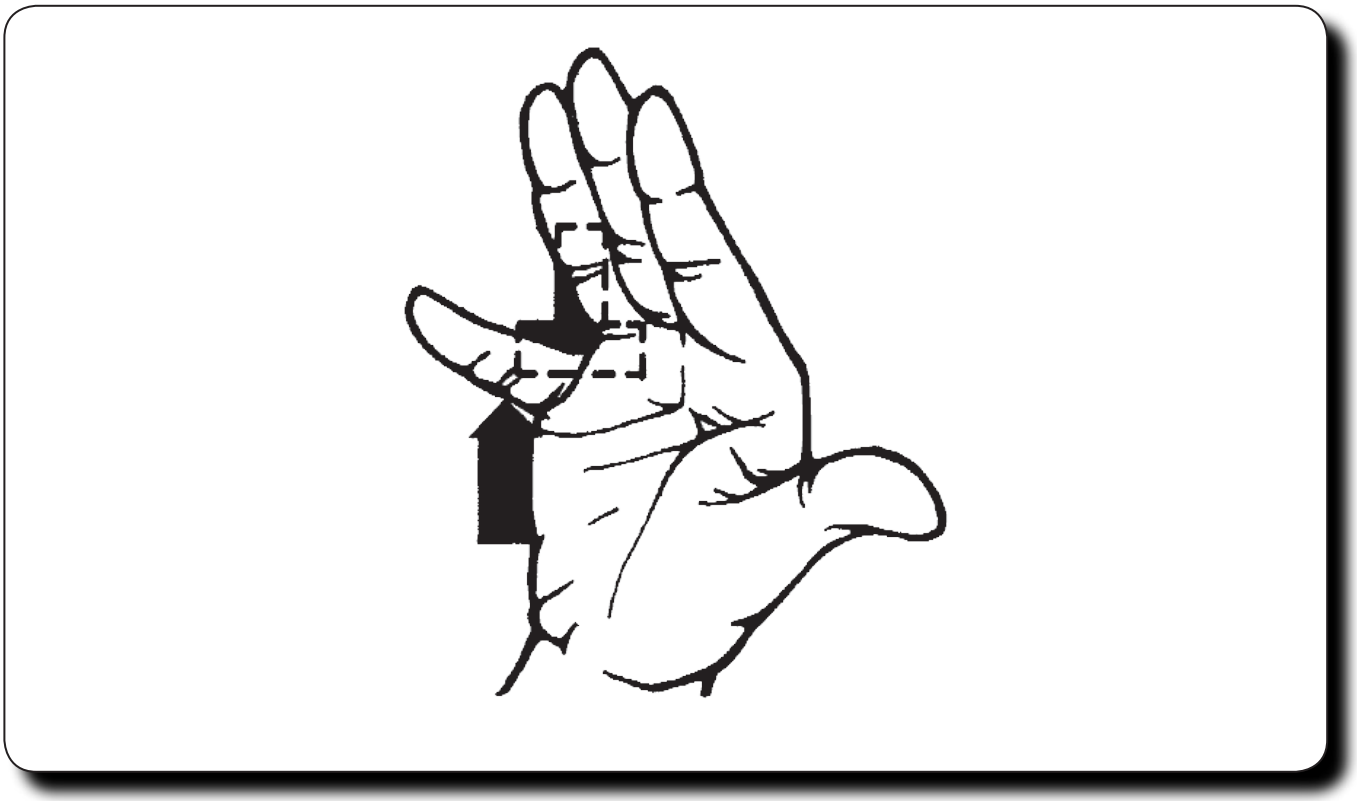
L. B. V.L. : C5L

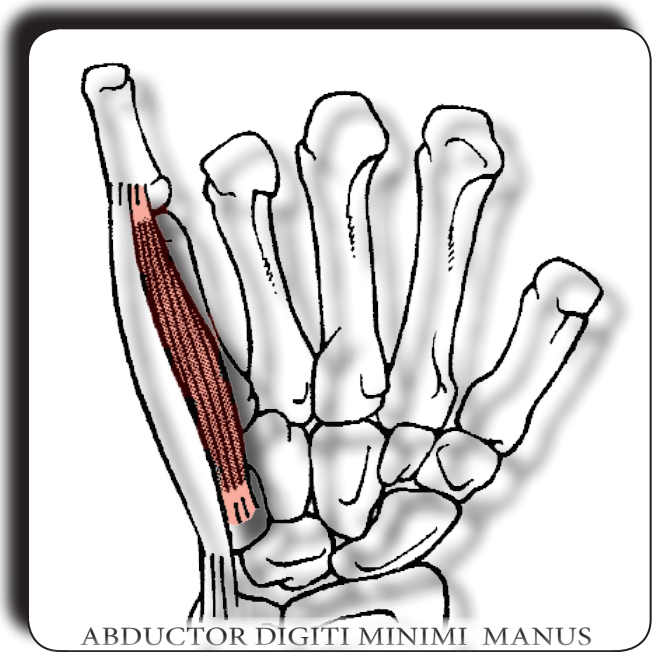
M. M. : T1

CRANIAL: Ethmoid

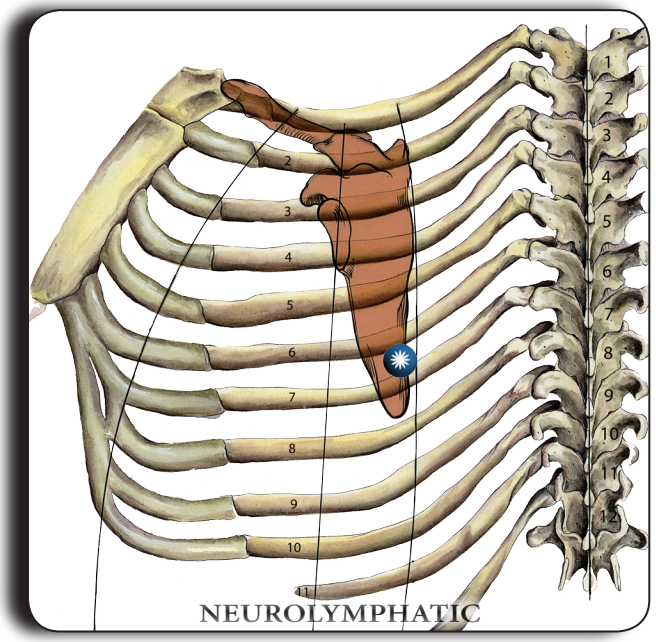
FOOT: 1st Cuneiform

NUTRIENT SOURCE:
1. Calcarea Fluoride-Homeopathic 6x (HP)




ABDUCTOR DIGITI MINIMI MANUS

NEUROVASCULAR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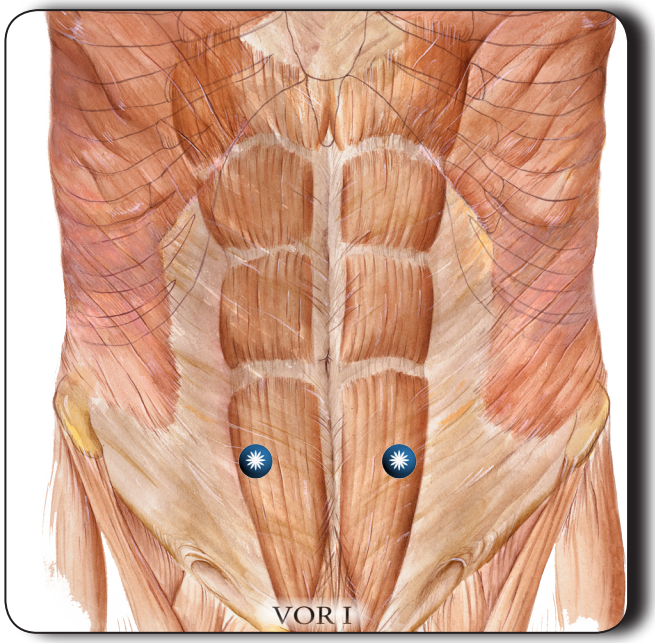
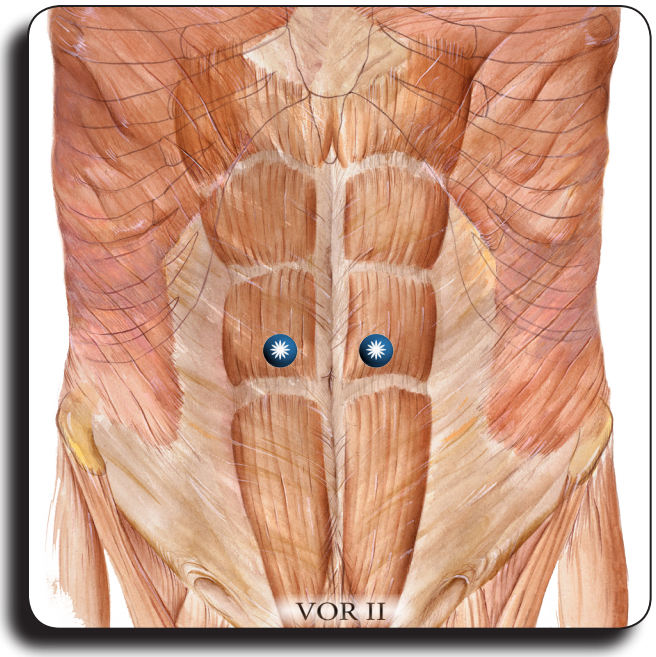
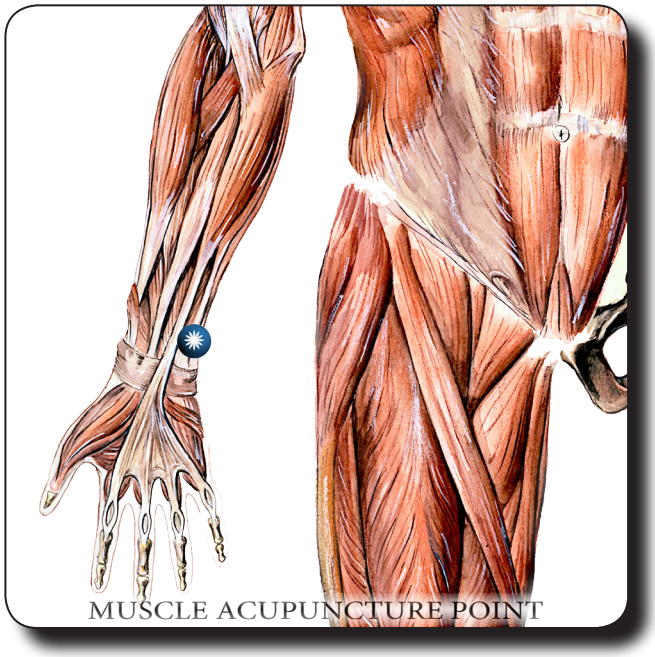
NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 582: ABDUCTOR DIGITI MINIMI MANUS, (Flexor Division)

ORIGIN: Pisiform bone.

INSERTION: Ulnar side of the base of the 1st phalanx of little finger.

ACTION: Flexion of 1st phalanx of little finger.

TEST:

Patient: Abduct and flex while extending middle and distal phalanges of little finger

Doctor: Position: Ipsilateral.
Brace: Dorsum of last two phalanges of little finger.
Contact: Palmar surface of little finger to extend through sagittal plane.

NEUROVASCULAR: (Ant/BL) Cranium, anterior aspect, zygomaticomaxillary suture.

NEUROLYMPHATIC: (Post/L) 6th ICS, at vertebral border of scapula.

VISCERAL ORGAN:

I. *Lymphatics - transverse colon:* (Ant/BL) Rectus Abdominis, 1st section, lateral part of belly, at the level of the crest of ilium.

II. *Adrenals:* (Ant/BL) Rectus Abdominis, 2nd section, medial part of belly, 1" superior to umbilicus.

M. A. P. : H4

V.L. : T2R

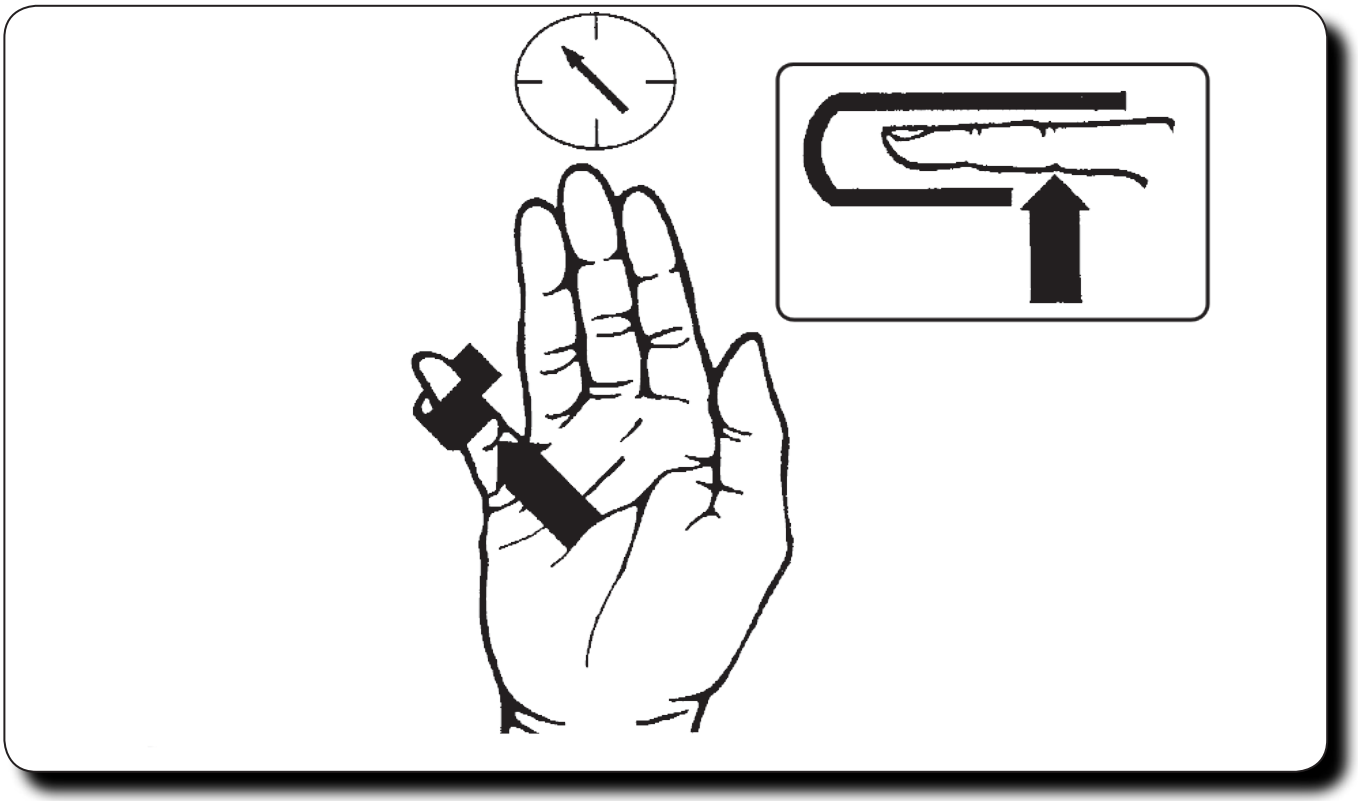
L. B. V.L. : T9R

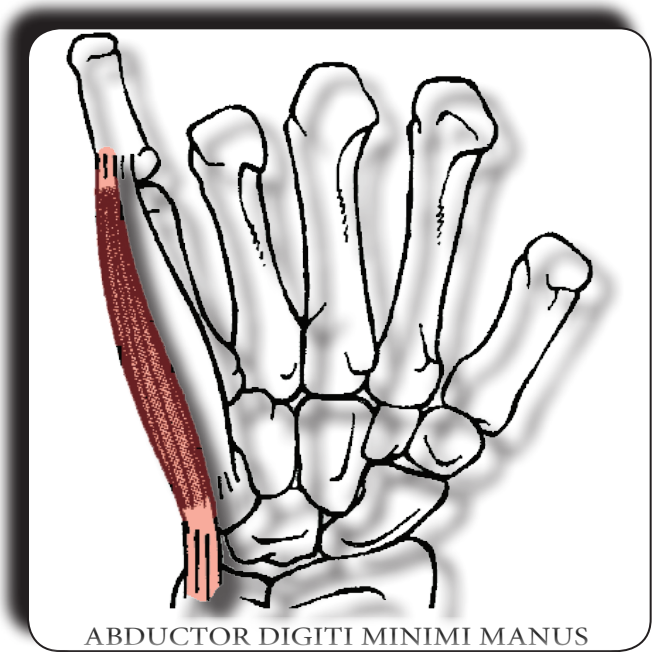
M. M. : C7

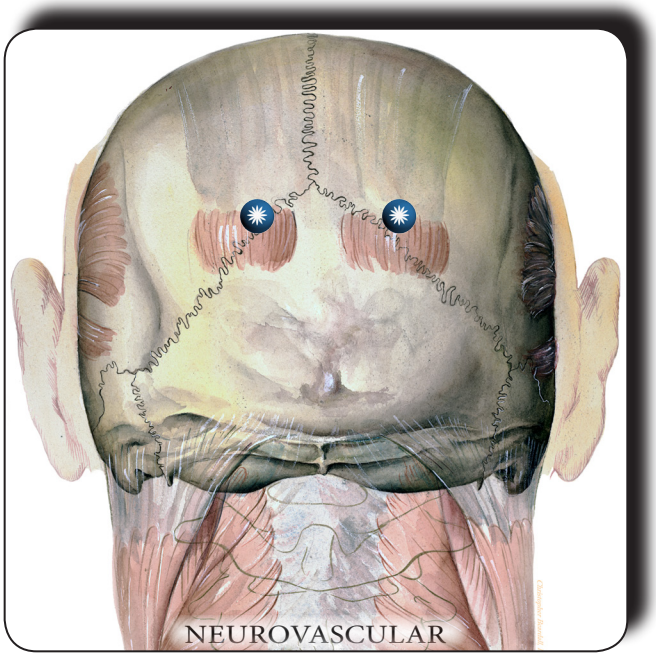
CRANIAL: Ethmoid

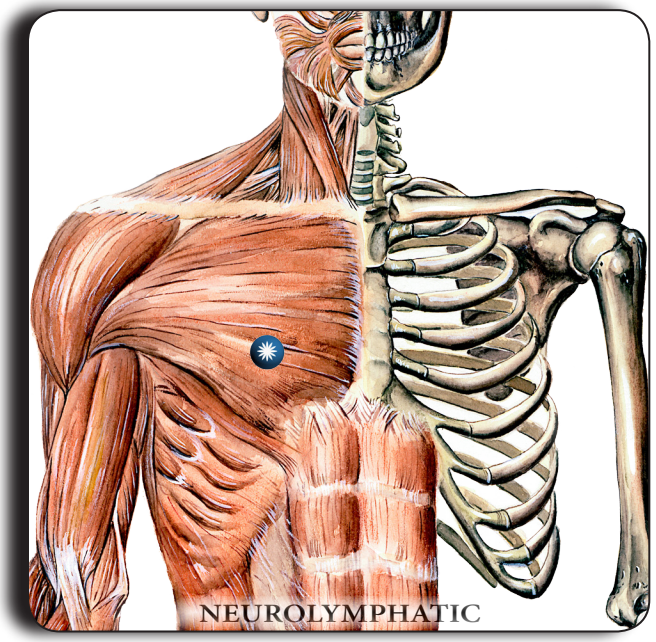
FOOT: 1st Cuneiform

NUTRIENT SOURCE:
1. Vasculin (S)




ABDUCTOR DIGITI MINIMI MANUS


NEUROVASCULAR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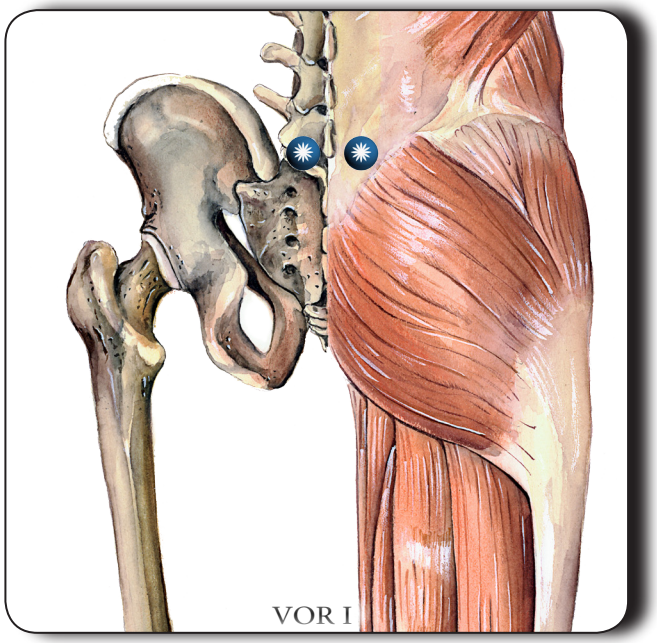
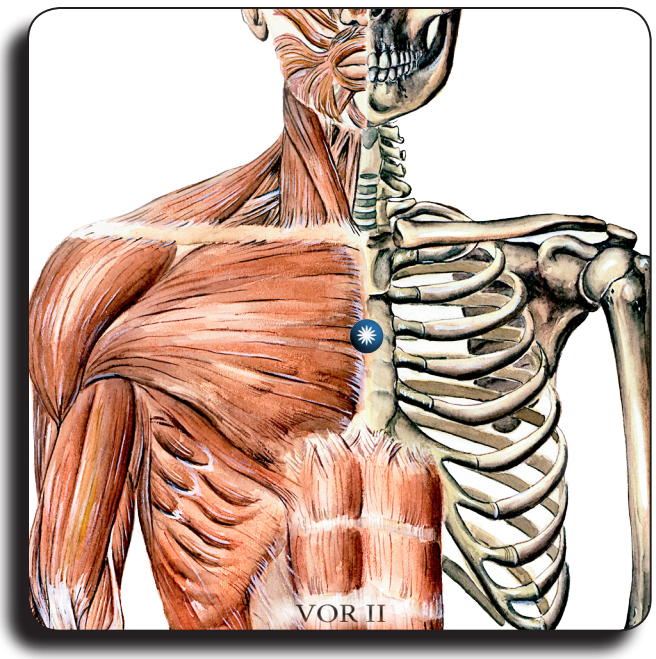
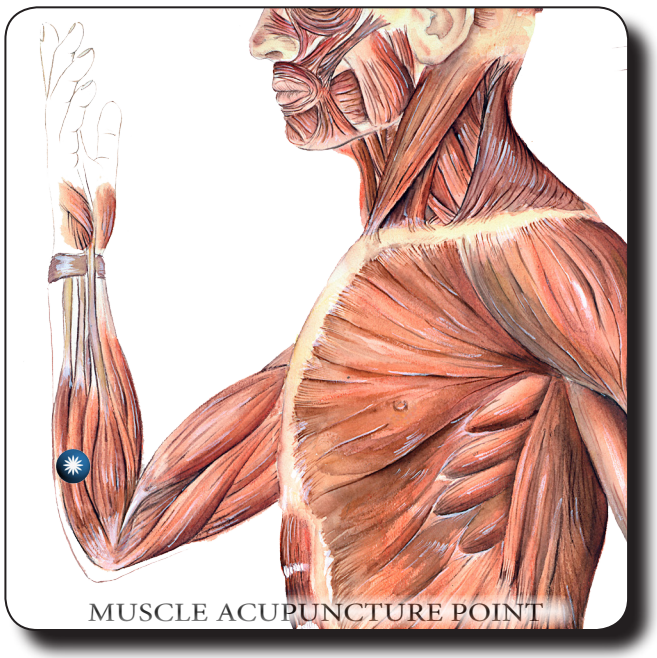

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 584: ABDUCTOR DIGITI MINIMI MANUS, (Abductor Division)

ORIGIN: Tendon of Flexor Carpi Ulnaris.

INSERTION: Ulnar side of base of proximal phalanx of little finger.

ACTION: Abduction of 1st phalanx of little finger.

TEST:

Patient: Supine. Supinate forearm on arm. Extend 2nd and 3rd phalanges of little finger. Abduct proximal phalanx towards ulnar bone.

Doctor: Position: Ipsilateral.
Brace: Palmar surface of fingers.
Contact: Lateral surface of little finger to adduct through oblique plane.

NEUROVASCULAR: (Post/BL) Cranium, posterior aspect, lambdoidal suture, 1 to 1 1/2" lateral to posterior fontanelle.

NEUROLYMPHATIC: (Ant/R) 4th ICS, 1-2" lateral to sternum.

VISCERAL ORGAN:

I. *Ileum - special cells-mineral absorption:* (Post/BL) Spinal Column, junction L5 - Sl, just lateral to spinous.

II. *Lungs - Bronchioles:* (Ant/Midline) Mid-Sternum, Cv19.

M. A. P. : Si7.3

V.L. : L3L

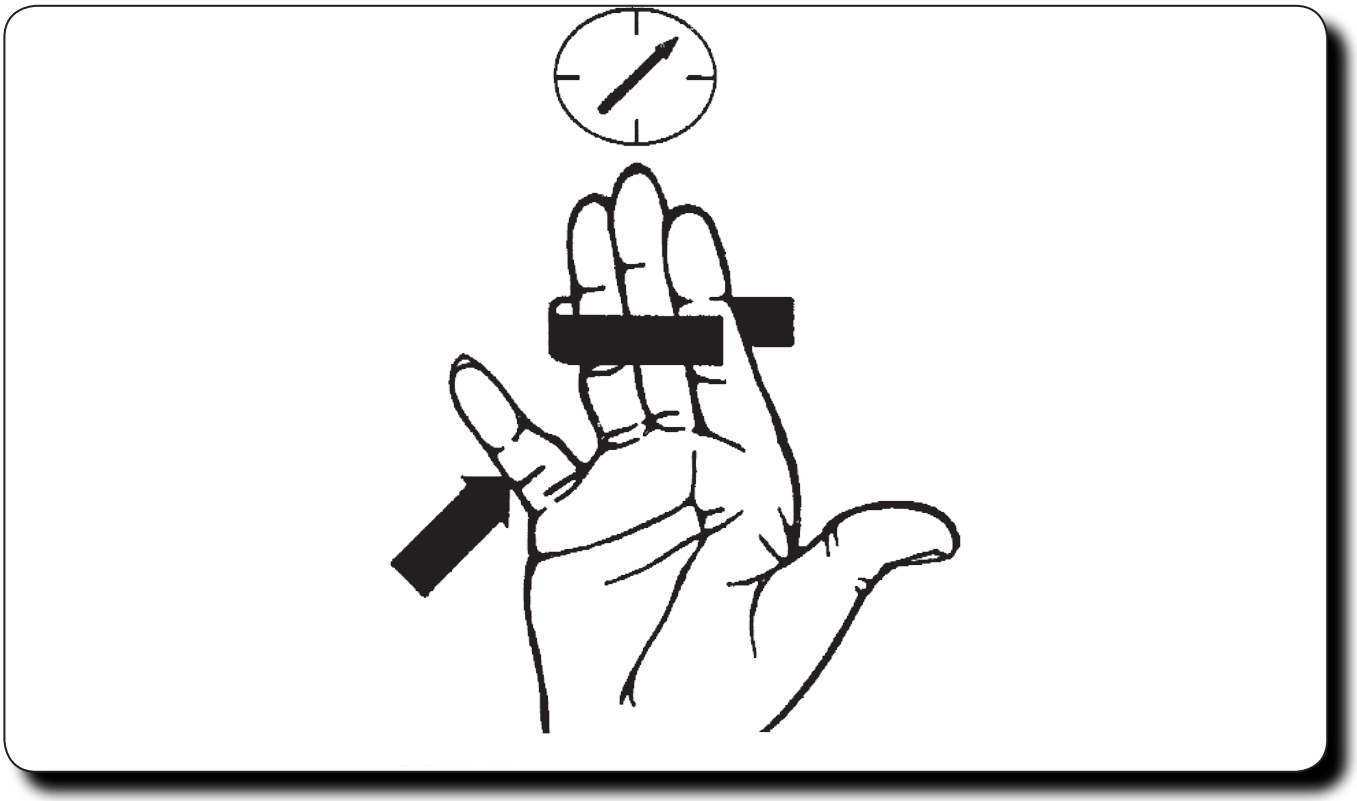
L. B. V.L. : C3L

M. M. : T1

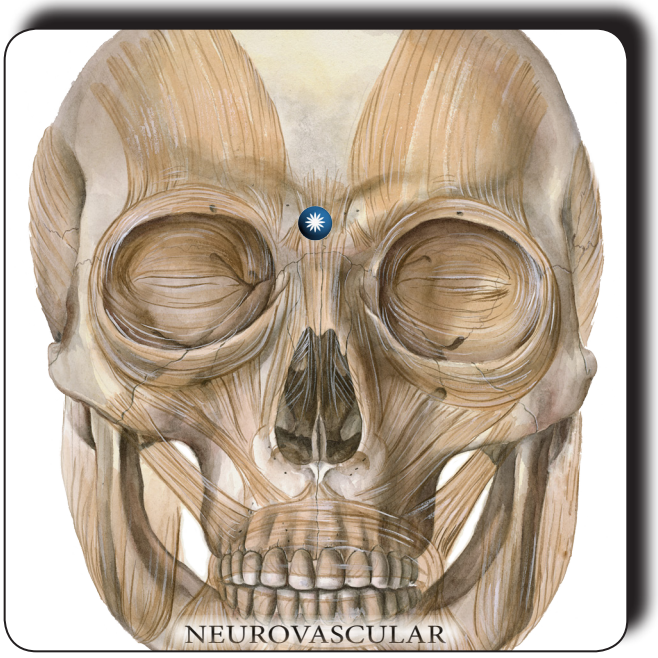
CRANIAL: Inferior Conchae

FOOT: Proximal phalanx 4th toe

NUTRIENT SOURCE:



OPPONENS DIGITI MINIMI MANUS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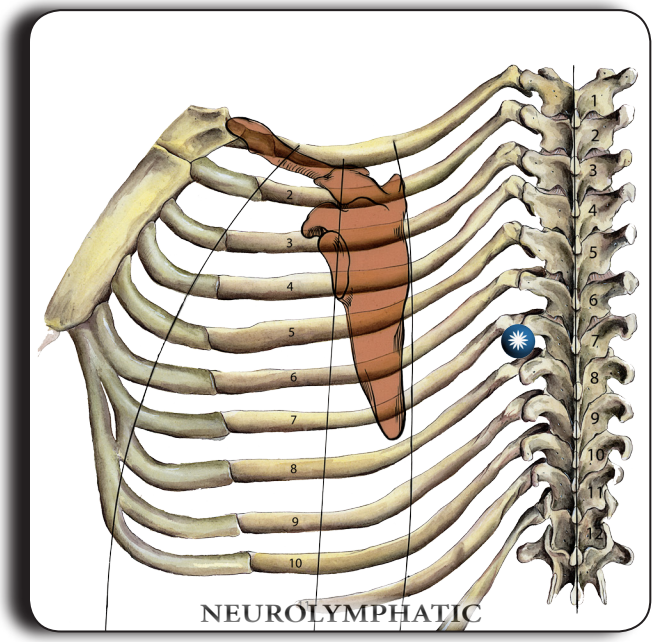

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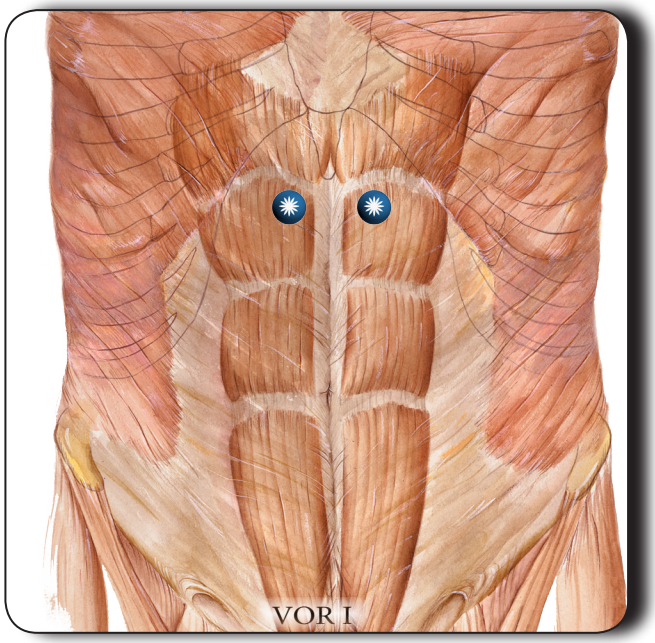
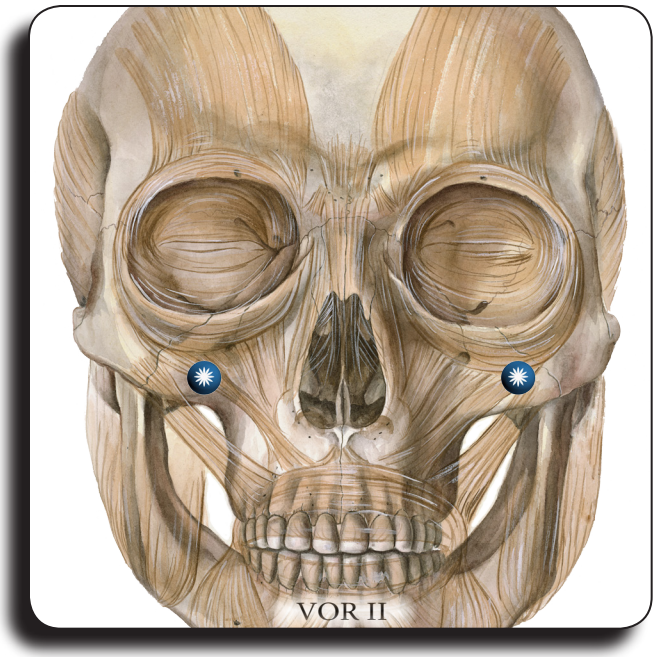
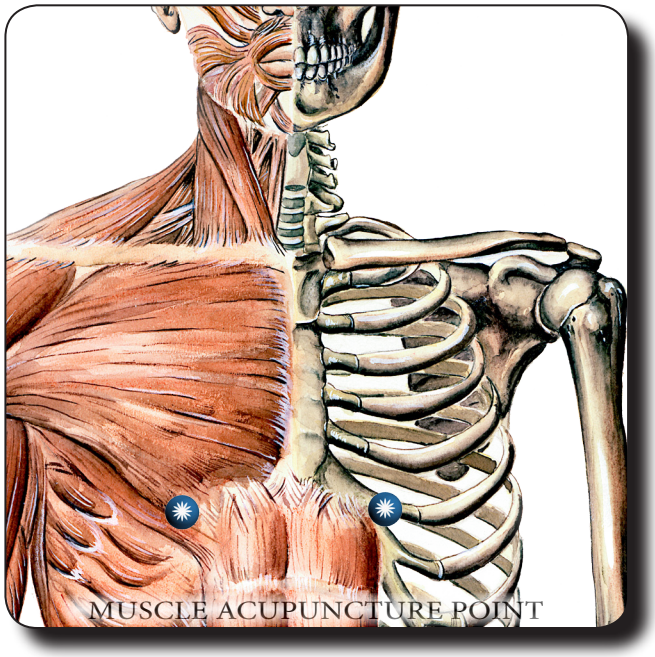

VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 586: OPPONENS DIGITI MINIMI MANUS, (Abductor Division)

ORIGIN: Hamulus of hamate bone.

INSERTION: Whole length of the palmar surface of the 5th metacarpal.

ACTION: Abducts the 5th metacarpal

TEST:

Patient: Supine. Supinate forearm on arm. Extend 1st, 2nd and 3rd phalanges of little finger. Abduct 5th metacarpal.

Doctor: Position: Ipsilateral.
Brace: Palmar surface of index, middle and ring finger.
Contact: Distal palmar aspect of 5th metacarpal to adduct through an oblique plane.

NEUROVASCULAR: (Ant/Midline) Nasal bone, superior aspect, center of nasal suture.

NEUROLYMPHATIC: (Post/L) 7th ICS, at transverse process.

VISCERAL ORGAN:

I. *Jejunum:* (Ant/BL) Rectus Abdominis, 3rd section, near insertion, 1" lateral to linea alba.

II. *Maxillary Sinus:* (Ant/BL) Maxillary bone directly below eye.

M. A. P. : K22.25, Junction 6th rib and costocartilage bilaterally.

V.L. : T10L

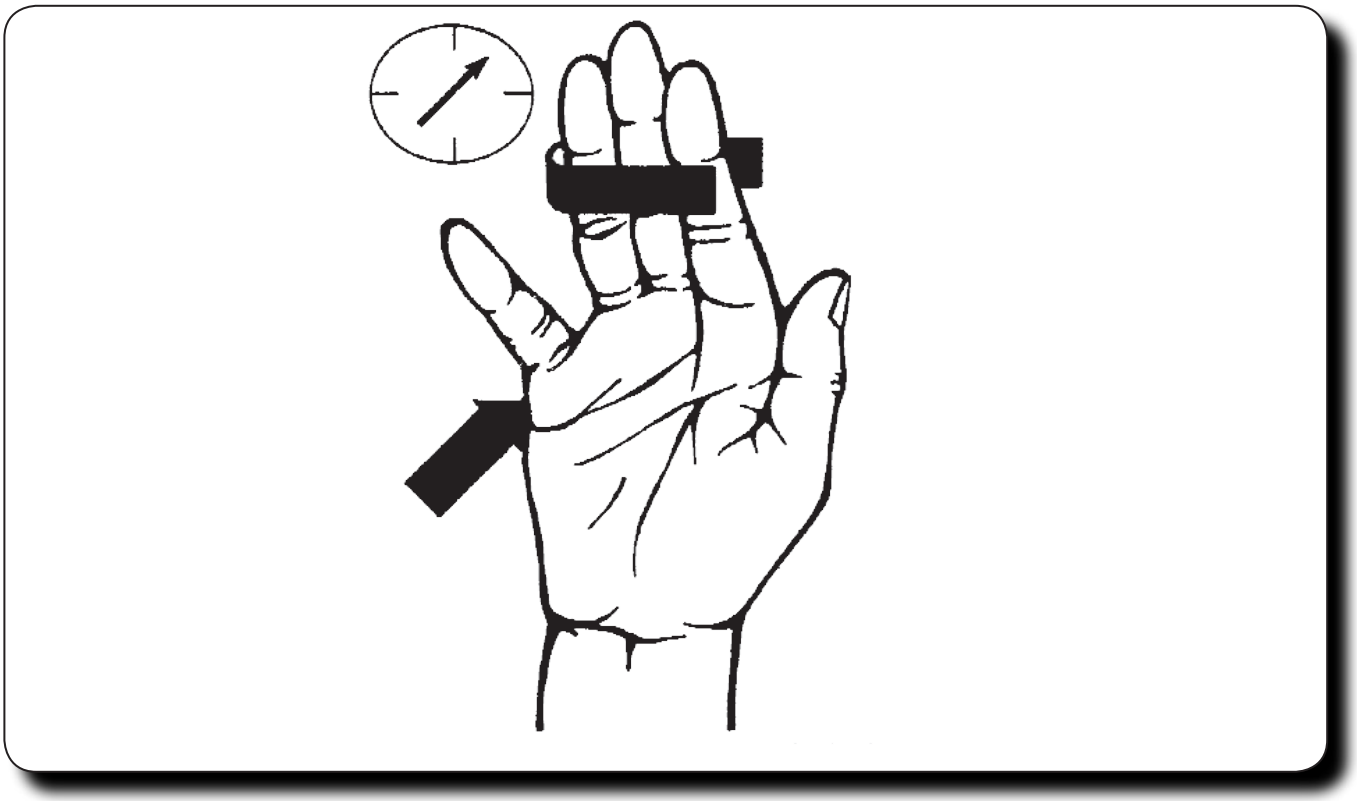
L. B. V.L. : T1L

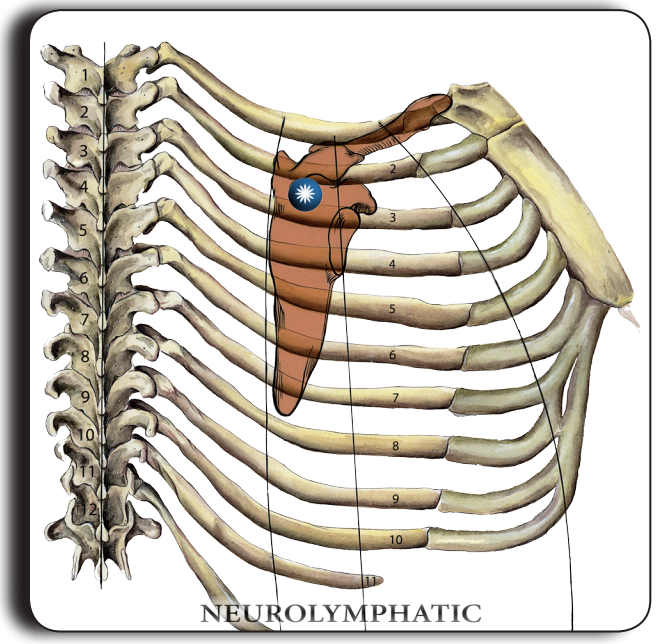
M. M. : T1

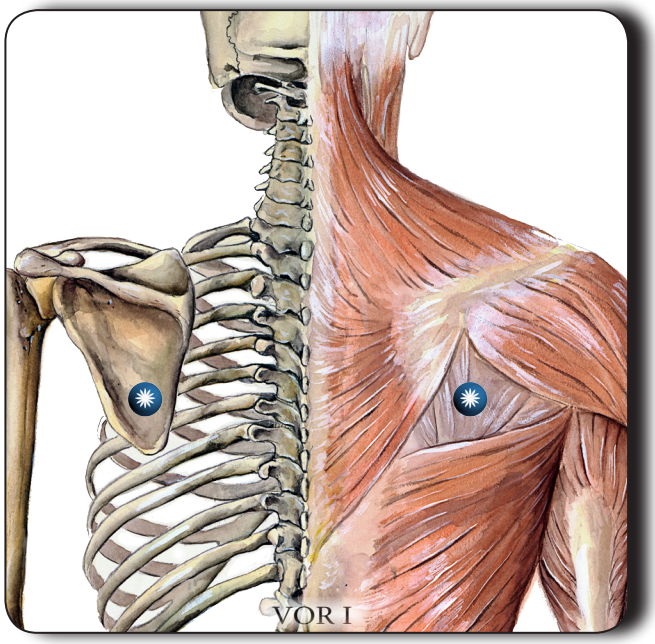
CRANIAL: Inferior Conchae

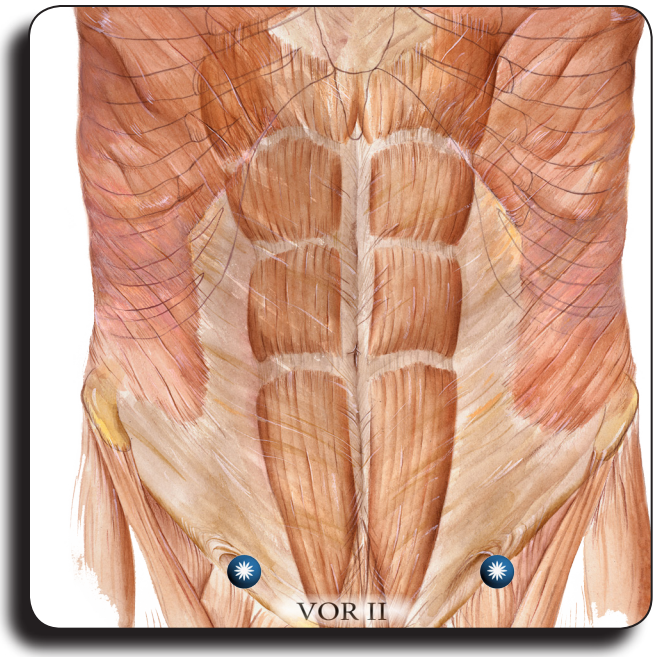
FOOT: Proximal phalanx 4th toe

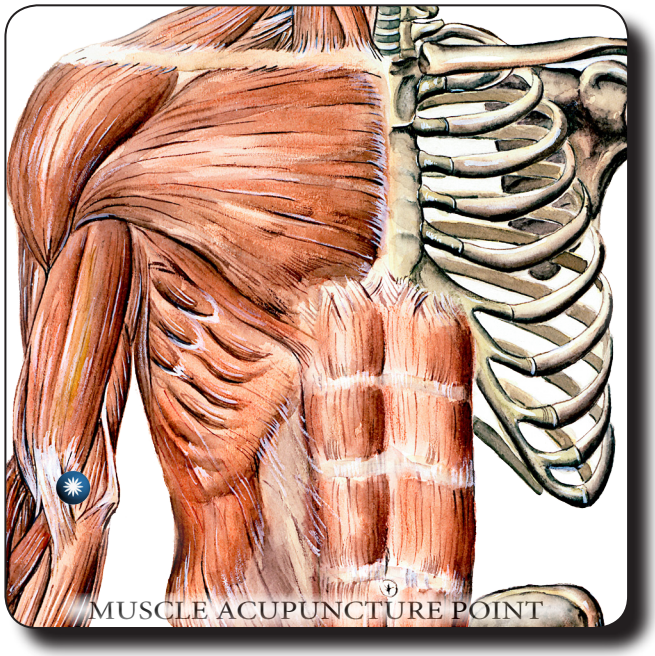
NUTRIENT SOURCE:
1. Cholacol (S)











588 OPPONENS DIGITI MINIMI MANUS, (Flexor)

Muscle 588: OPPONENS DIGITI MINIMI MANUS, (Flexor Division)

ORIGIN: Transverse carpal ligament.

INSERTION: Distal sections of the 5th metacarpal bone on its ulnar margin.

ACTION: Flexes and rotates the 5th metacarpal, laterally, ("Hallows the Hand").

TEST:

Patient: Extend middle and distal phalanx of little finger. Slightly flex proximal phalanx.

Doctor: Position: Ipsilateral.
Brace: Dorsum surface of hand.
Contact: Palmar surface of 5th metacarpal and extend through sagittal plane.

NEUROVASCULAR: (Ant/BL) Maxillary bone, anterior aspect, 2" lateral to the nose at the level of the acanthion.

NEUROLYMPHATIC: (Ant/R) 2nd ICS, midaxillary line.

VISCERAL ORGAN:

I. *Pancreas - Protein:* (Post/BL) Scapula, Infraspinatus fossa, 2" superior to inferior angle just below Si 11.

II. *Prostate:* (Ant/BL) Pubes, 2" lateral to midline, superior to Obturator foramen.

M. A. P. : Cx3

V.L. : T2L

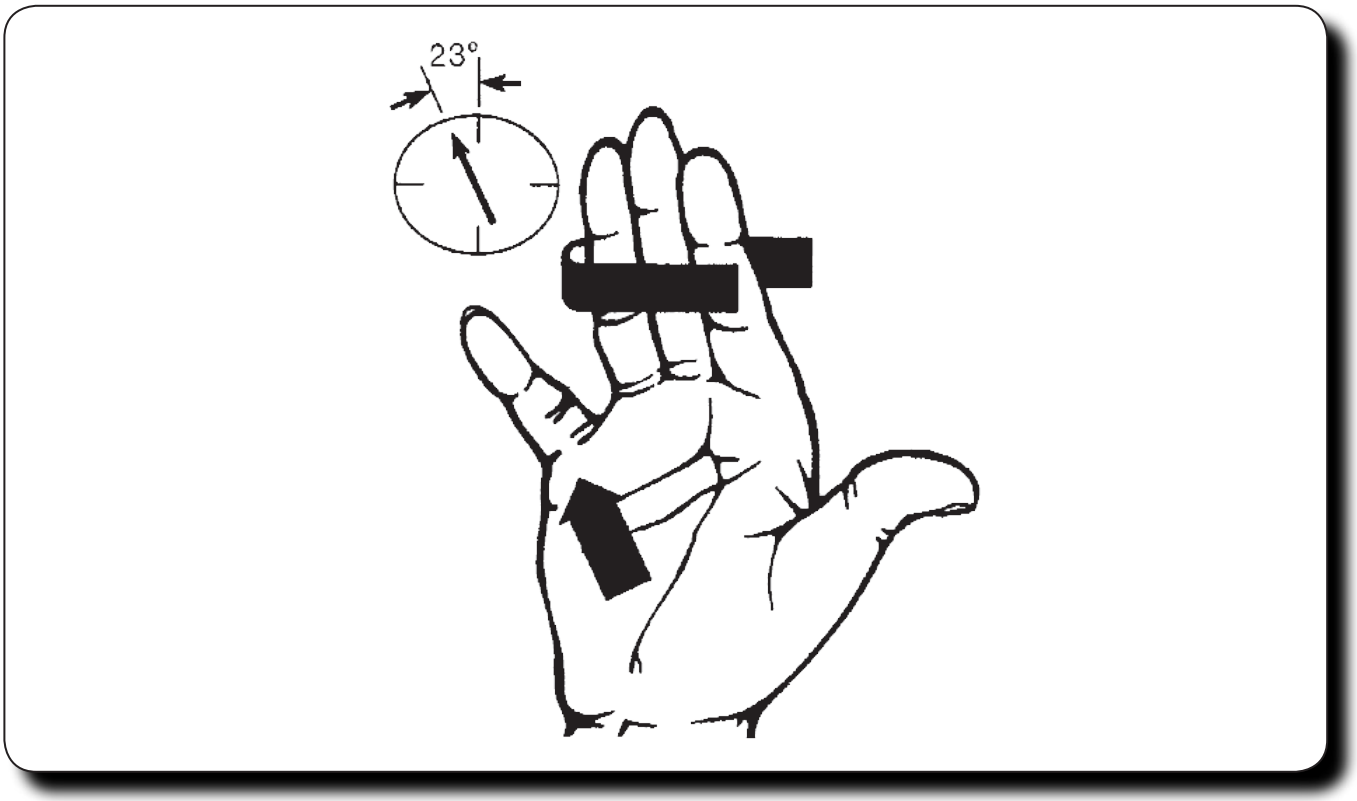
L. B. V.L. : T9L

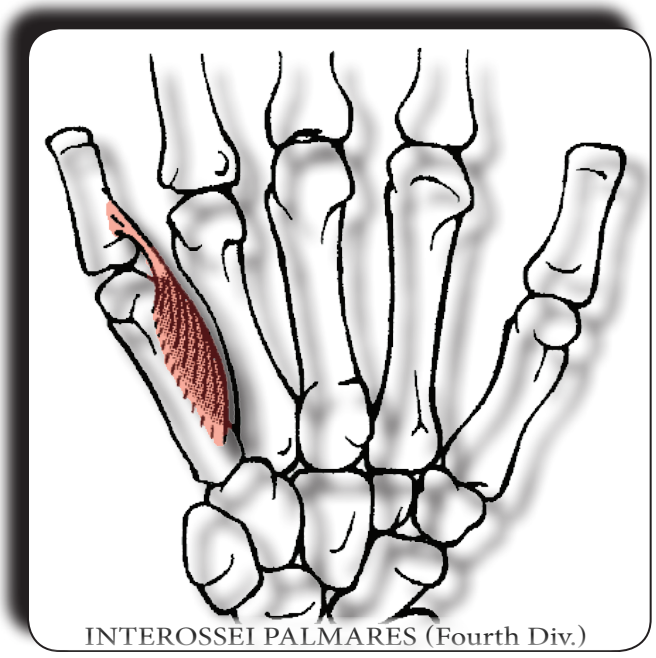
M. M. : T1

CRANIAL: Parietal

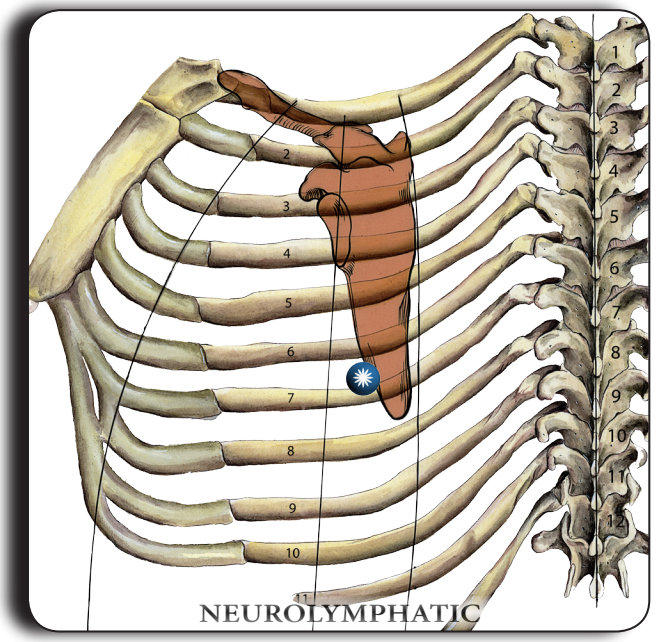
FOOT: Talus

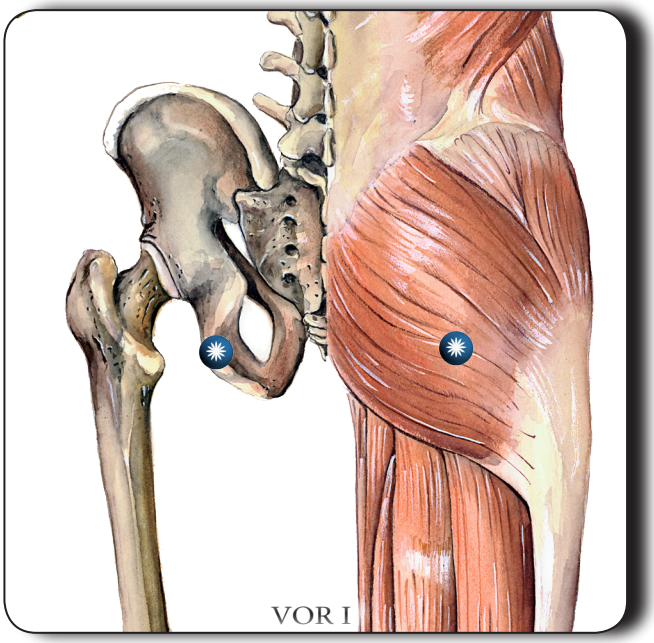
NUTRIENT SOURCE:
1. Calcifood (S)

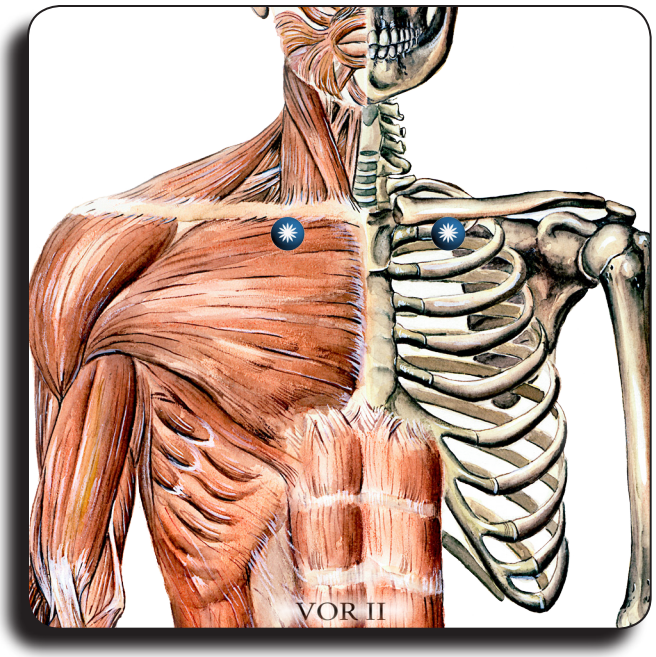


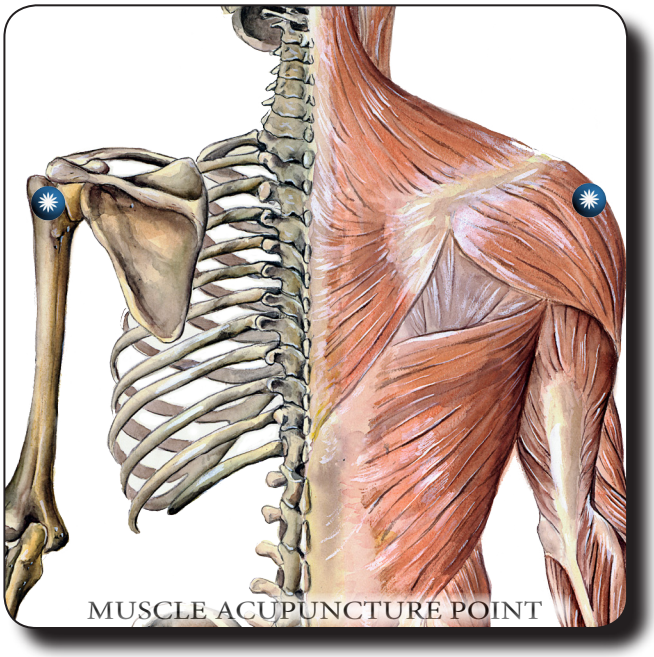

INTEROSSEI PALMARES (Fourth Div.)

NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 590: INTEROSSEI PALMARES, (Fourth Division)

ORIGIN: Radial side of the 5th metacarpal bone.

INSERTION: Radial side of the proximal phalanx of the little finger and attached in common with 4th lumbrical to extensor tendon.

ACTION: Ensures stability of the extensor tendon.

TEST:

Patient: Flex little finger 6 degrees and adduct toward ring finger.

Doctor: Position: Ipsilateral.
Brace: Dorsum surface of hand.
Contact: Medial aspect of little finger to abduct and extend from ring finger.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, just superior and medial to frontal eminence.

NEUROLYMPHATIC: (Lat/L) 6th ICS, midaxillary line.

VISCERAL ORGAN:

I. *Spleen:* (Post/BL) Pelvis, posterior aspect, belly of Gluteus Maximus at level of coccyx and G30, halfway between these two points.

II. *Larynx:* (Ant/BL) On 1st rib, inferior to clavicle and 2" lateral to sternum.

M. A. P. : Tw14

V.L. : T2R

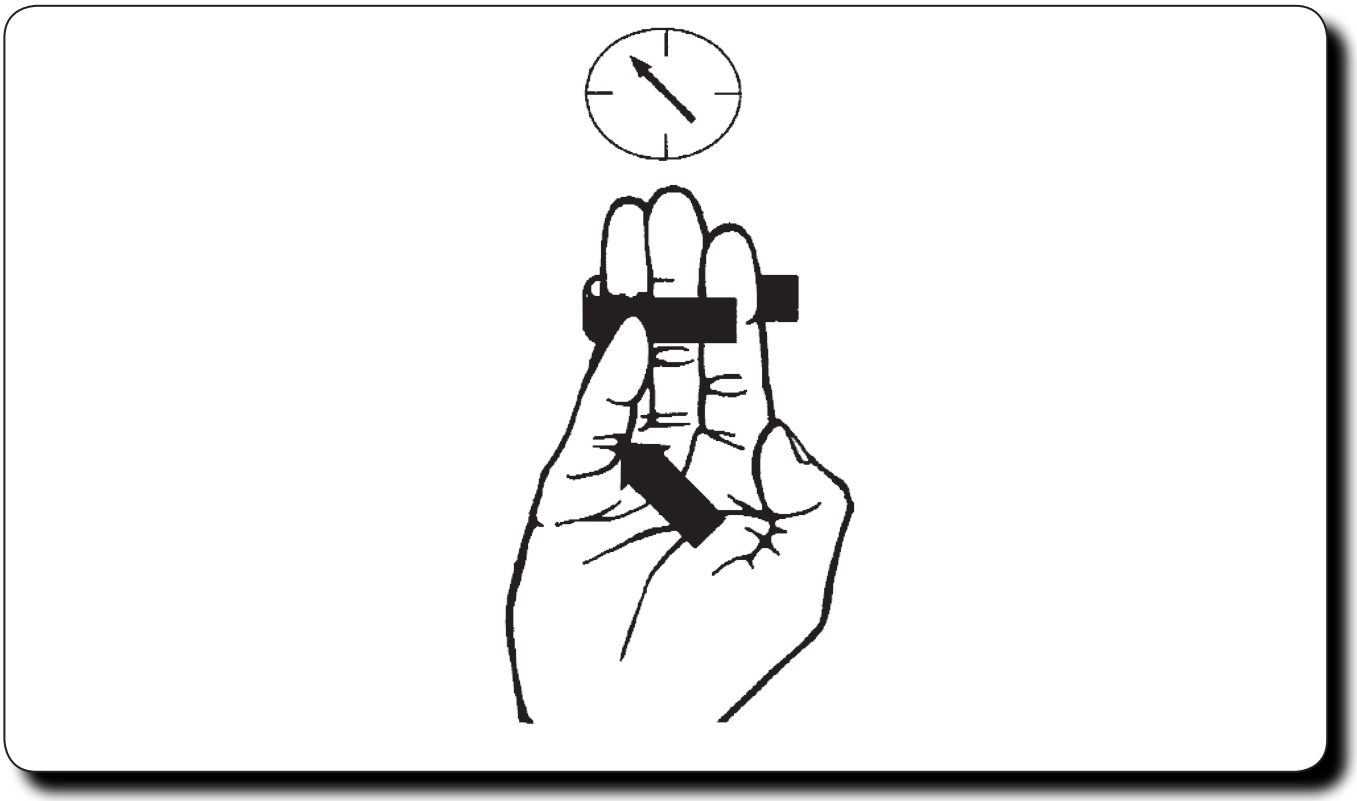
L. B. V.L. : T9R

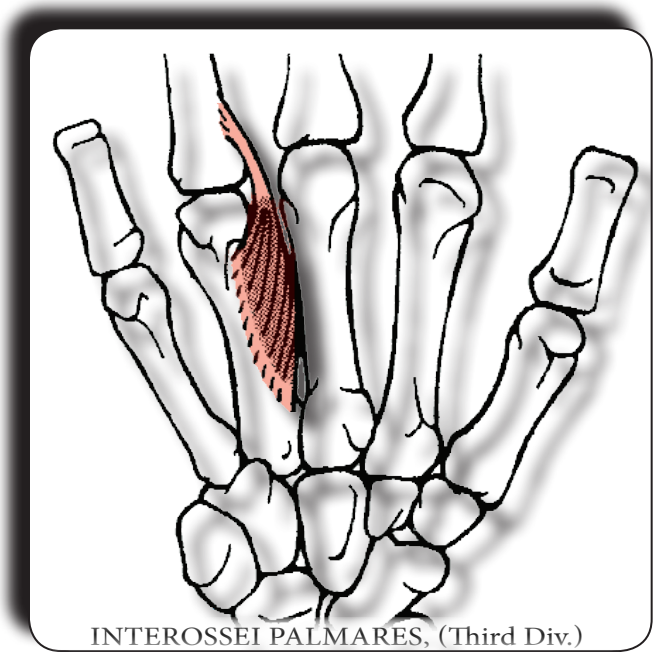
M. M. : T1

CRANIAL: Occiput

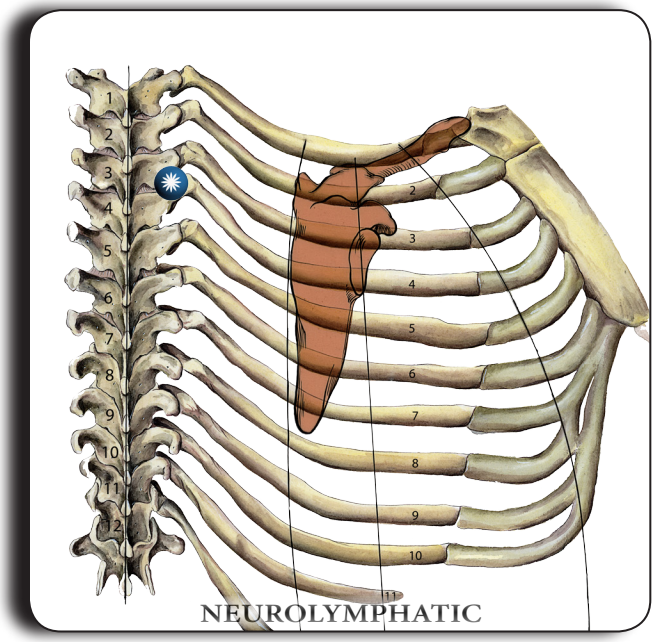
FOOT: Calcaneus

NUTRIENT SOURCE:
1. Cyruta + (S)

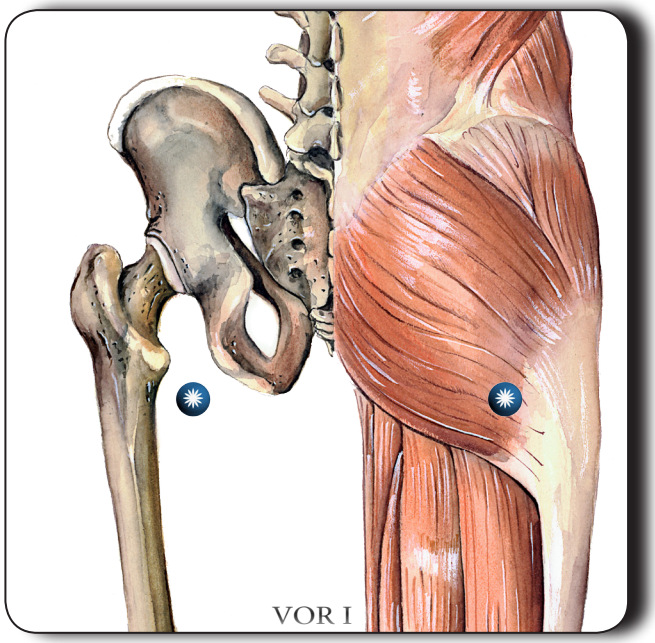


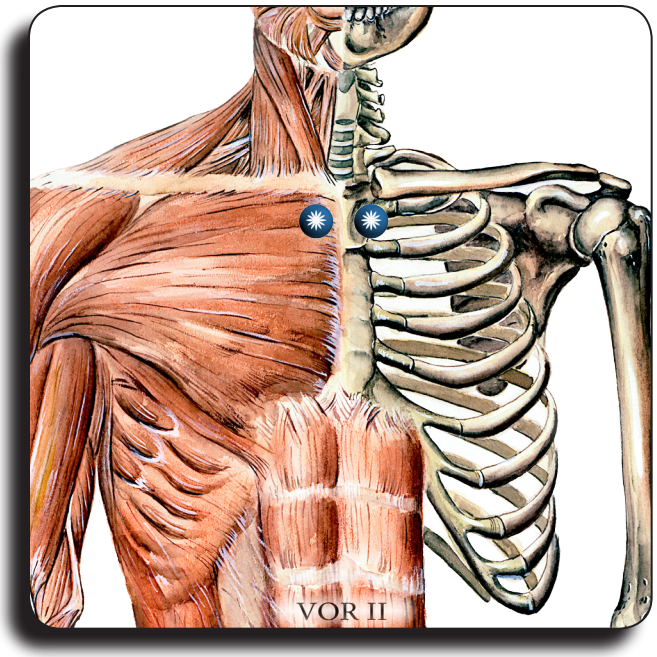

INTEROSSEI PALMARES, (Third Div.)

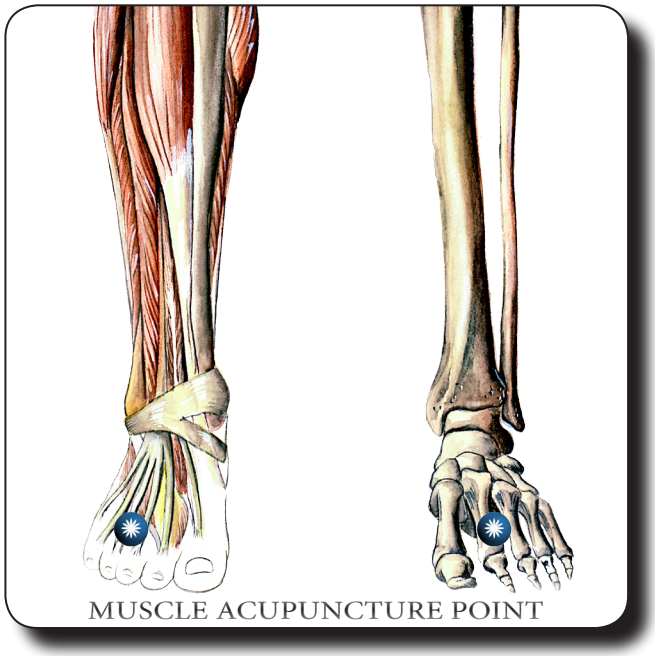
NEUROVASCULAR



NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 592: INTEROSSEI PALMARES, (Third Division)

ORIGIN: Entire length of radial side of 4th metacarpal.

INSERTION: Base of proximal phalanx of ring finger on radial side.

ACTION: Flexes and adducts ring finger toward hand.

TEST:

Patient: Supine. Supinate forearm on arm. Flex ring finger 6 degrees and adduct toward midline of hand.

Doctor: Position: Ipsilateral.
Brace: All other fingers in neutral position.
Contact: Radial side of ring finger to abduct through an oblique plane.

NEUROVASCULAR: (Ant/BL) Frontal bone, anterior aspect, 1" superior and 1/2" medial to prominence.

NEUROLYMPHATIC: (Post/R) 3rd ICS, just lateral to spine .

VISCERAL ORGAN:

I. *Gonads:* (Post/BL) Pelvis, posterior aspect, belly of Gluteus Maximus, near insertion of lowest fibers.

II. *Pharynx:* (Ant/BL) Sternum, just inferior and lateral to Cv22.

M. A. P. : K1

V.L. : T10R

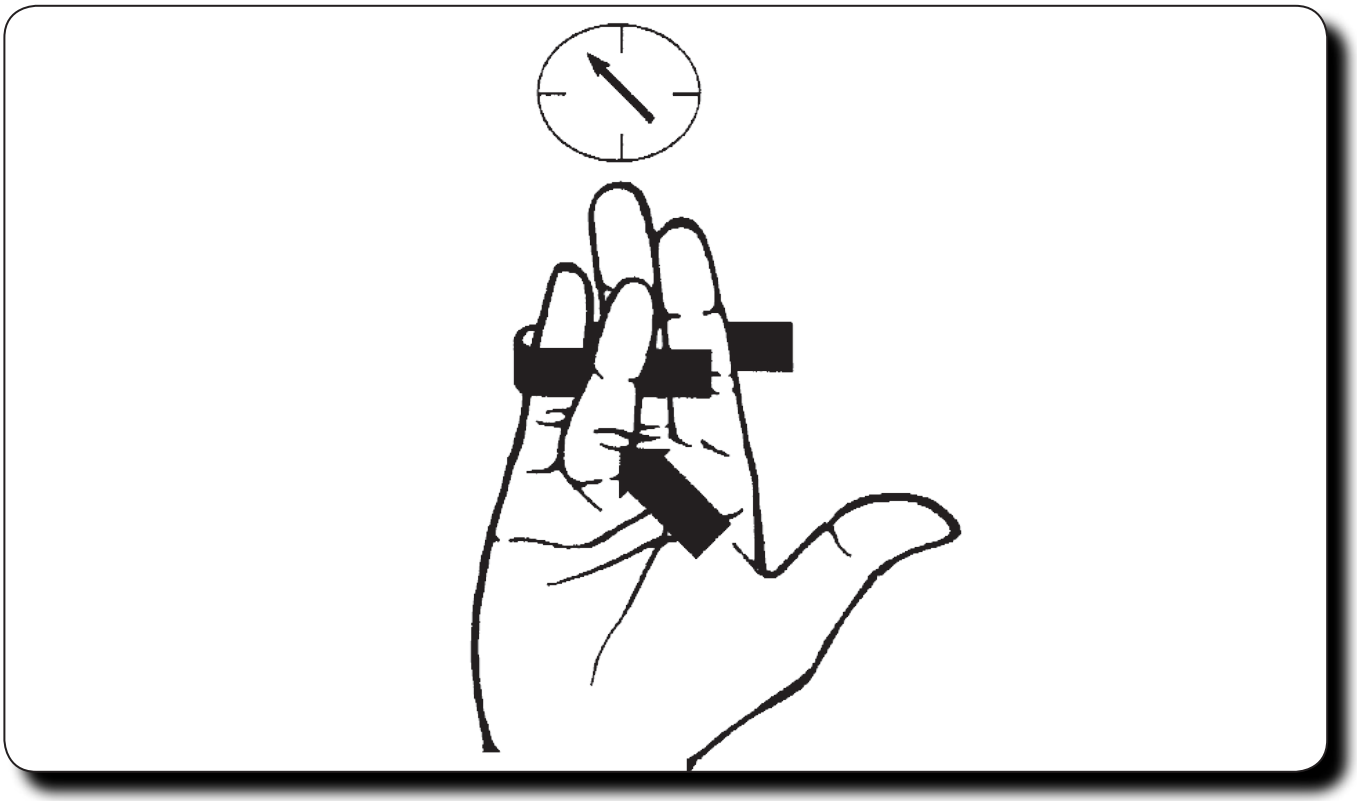
L. B. V.L. : T1R

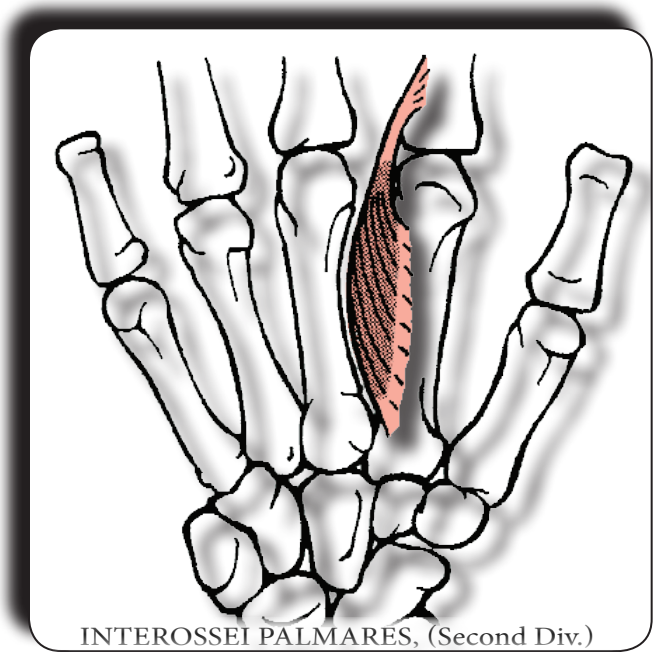
M. M. : T2

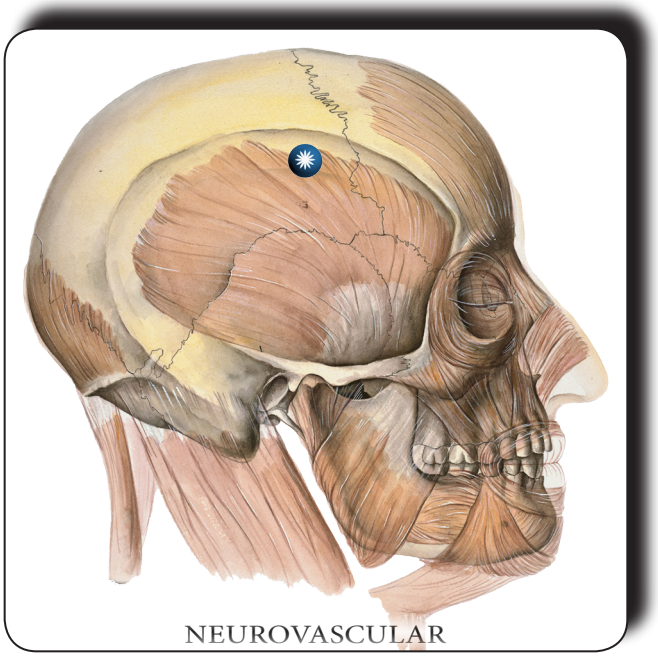
CRANIAL: Occiput

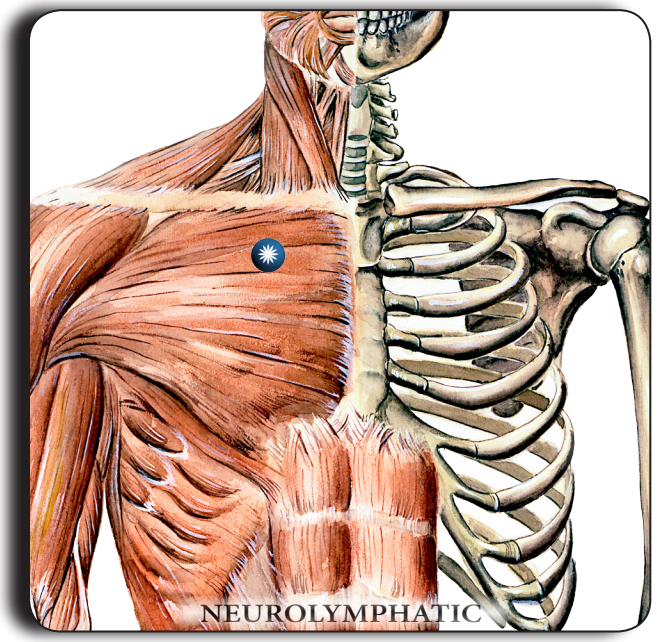
FOOT: Calcaneus

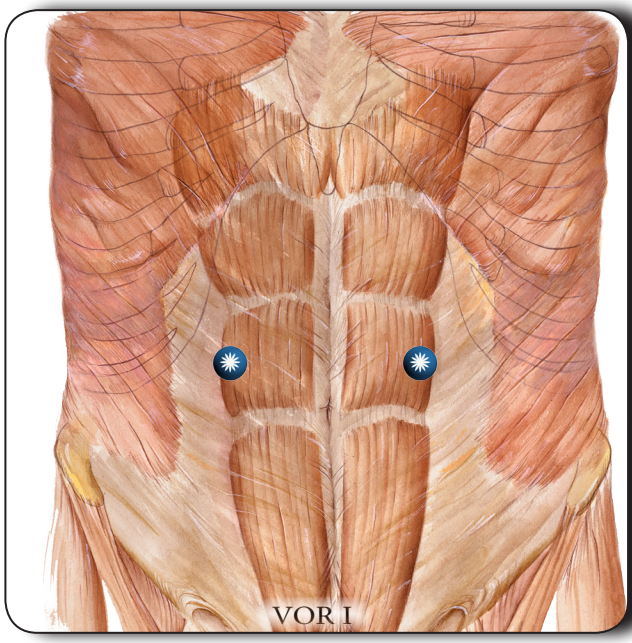
NUTRIENT SOURCE
1. Collagen C (S)

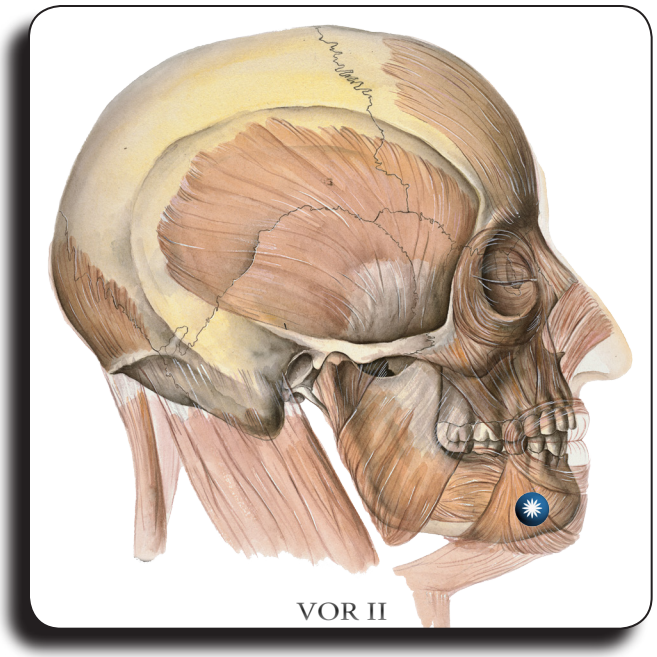


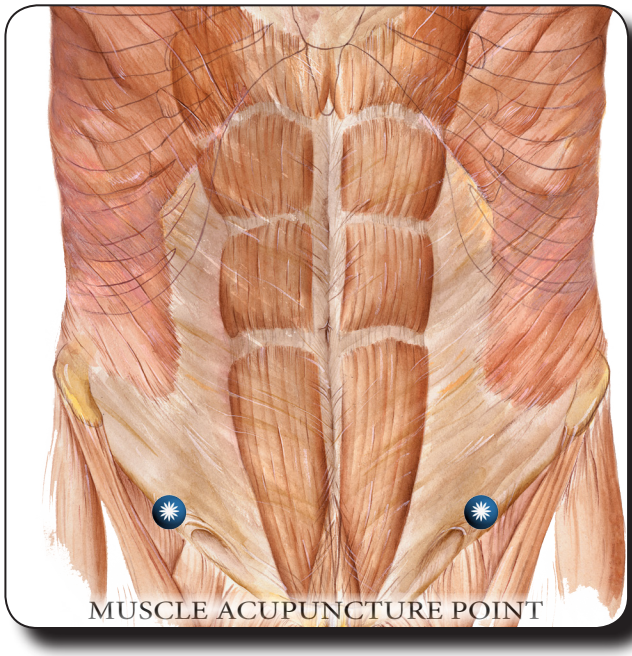

INTEROSSEI PALMARES, (Second Div.)


NEUROVASCULAR


NEUROLYMPHATIC


VOR I


VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 594: INTEROSSEI PALMARES, (Second Division)

ORIGIN: Entire length of ulnar surface of 2nd metacarpal.

INSERTION: Base of proximal phalanx of index finger, ulnar side.

ACTION: Flexes and adducts index finger toward hand.

TEST:

Patient: Supine. Supinate forearm on arm. Flex index finger 6 degrees and adduct toward midline of hand.

Doctor: Position: Ipsilateral.
Brace: All remaining fingers.
Contact: Medial aspect of index finger to abduct through an oblique plane.

NEUROVASCULAR: (Lat) Parietal bone, lateral aspect, 4" superior to EAC and 1/2" anterior, just below superior temporal line.

NEUROLYMPHATIC: (Ant/R) 1st ICS, 2-3" lateral to sternum.

VISCERAL ORGAN:

I. *Ileum - special cells:* (Ant/BL) Rectus Abdominis, 2nd section, lateral border.

II. *Salivary glands - sublingual:* (Lat/BL) Mandible, submandibular fossa, 1" lateral to midline, under side of jaw.

M. A. P. : Sp13

V.L. : L5R

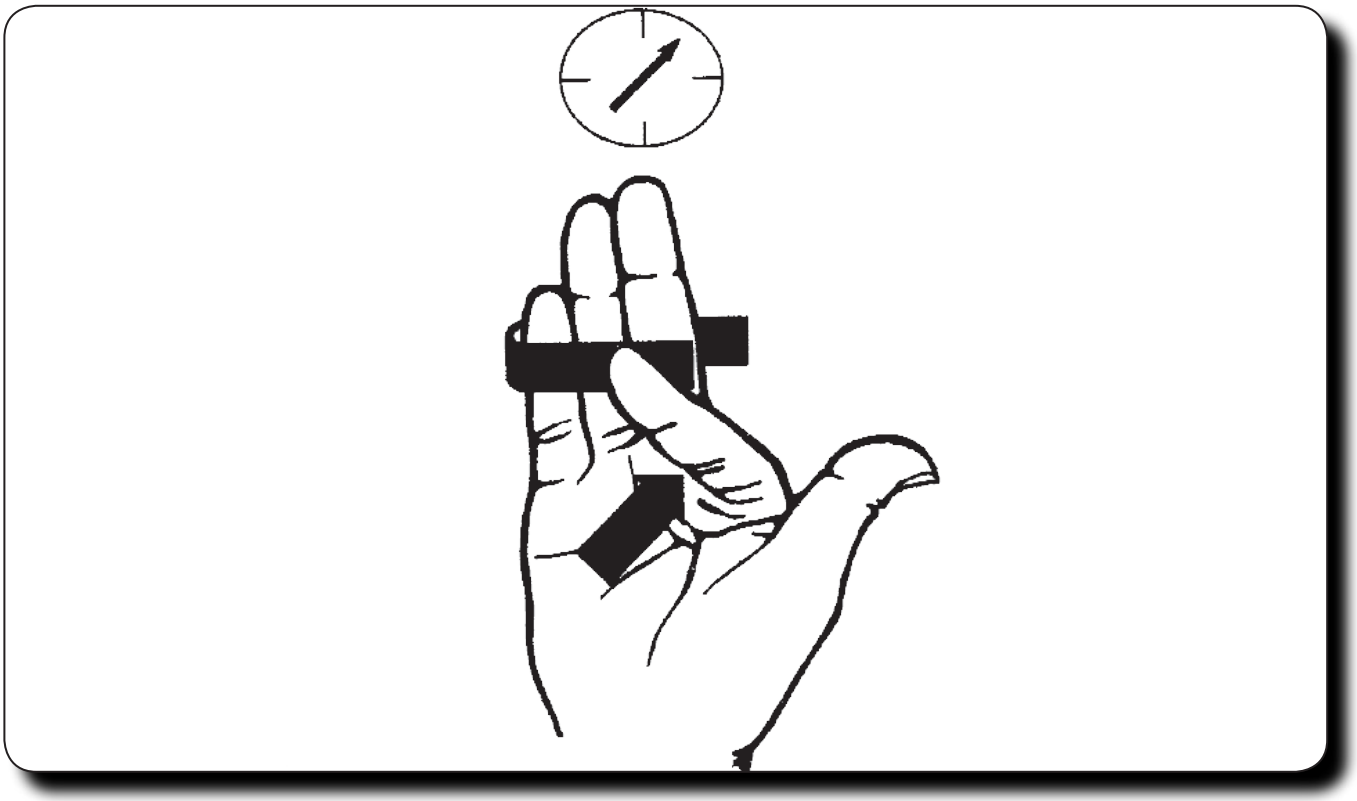
L. B. V.L. : C1R

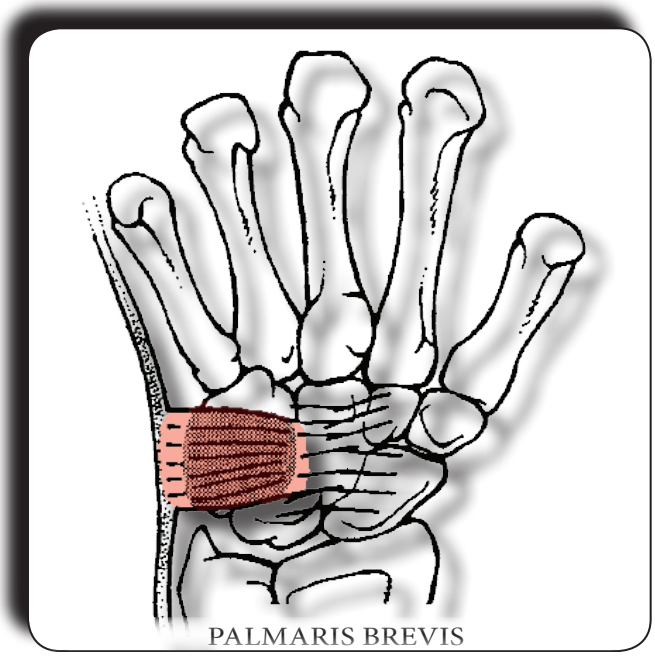
M. M. : T1

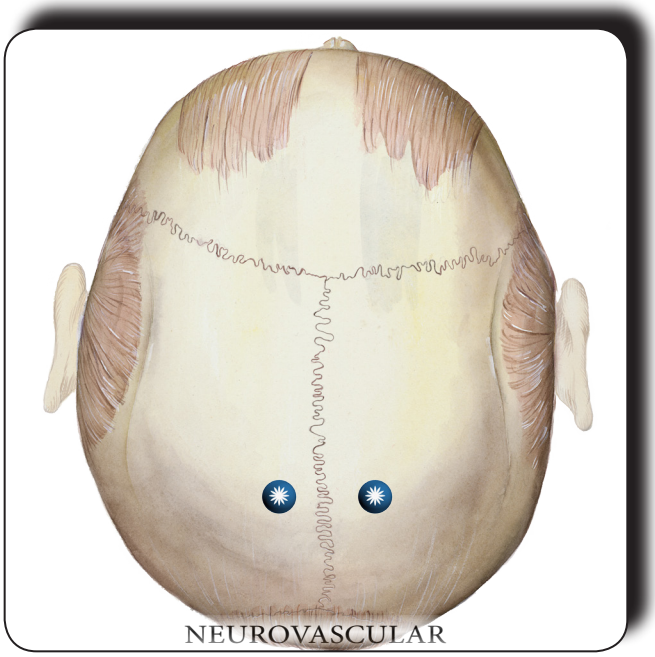
CRANIAL: Vomer

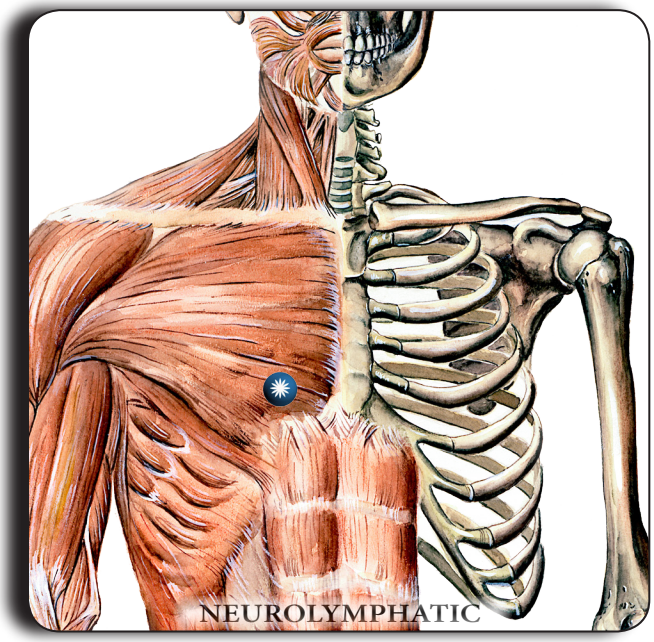
FOOT: 2nd Metatarsal

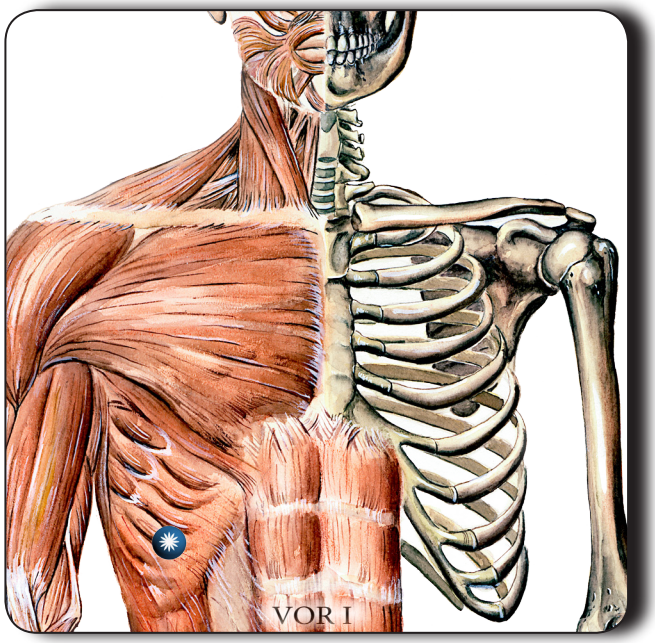
NUTRIENT SOURCE
1. Betacol (S)



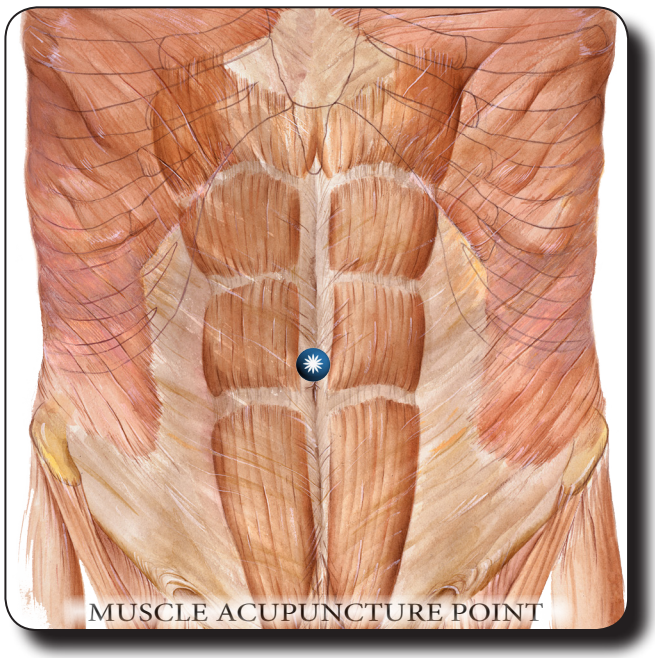

PALMARIS BREVIS


NEUROVASCULAR


NEUROLYMPHATIC


VOR I

VOR II


MUSCLE ACUPUNCTURE POINT

Muscle 596: PALMARIS BREVIS

ORIGIN: By a tendinous fascicule from the transverse carpal ligament and palmar aponeurosis.

INSERTION: Skin on the ulnar border of the palm of the hand.

ACTION: Draws the skin on the ulnar side of the hand toward the center contributing to the security of palmar grip.

TEST:

Patient: Draw the fingers of the hand toward the thumb accentuating 5th metacarpal adduction

Doctor:

Position: Ipsilateral.
Brace: Dorsum of hand.
Contact: The lower part of the hypothenar eminence to abduct and extend the tissue through a coronal plane.

NEUROVASCULAR: (Sup/BL) Parietal bone, superior aspect, just lateral to sagittal suture halfway between anterior and posterior fontanelles.

NEUROLYMPHATIC: (Ant/R) 5th ICS, just lateral to cartilage junction.

VISCERAL ORGAN:

I. *Gallbladder:* (Ant/R) Tip of 8th rib at costocartilage junction.

II. *Salivary Glands - sublingual:* (Ant/BL) Zygomatic bone, origin of Zygomatic Major muscle.

M. A. P. : Cv9

V.L. : T9R

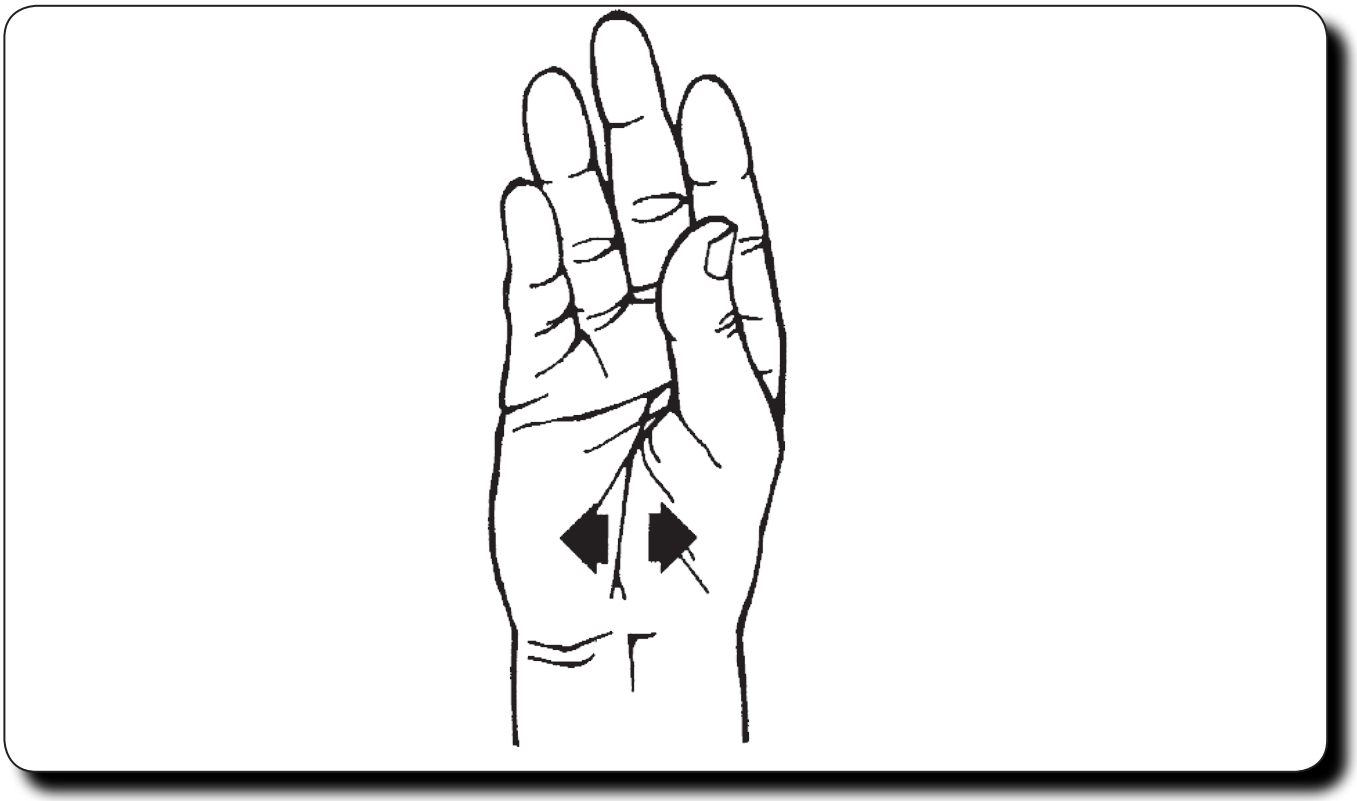
L. B. V.L. : T2R

M. M. : C8

CRANIAL: Parietal

FOOT: Talus

NUTRIENT SOURCE:
1. Vitamin E (S)



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GLOSSARY of ABBREVIATIONS

Ant	Anterior
ASIS	Anterior superior iliac spine of ilium
BL	Bilateral
Contralateral	Pertains to opposite side of the body (R or L) from reference
CN	Cranial Nerve
EAC	External Auditory Canal
EOP	External occipital protuberance
I.C.S.	Intercostal space
Ipsilateral	Pertains to same side of the body (R or L) as reference
L	Left or Lumbar
Lat	Lateral
L.B.	Lovett Brother
M.A.P.	Muscle acupuncture point
Midline	Midline of the body or organ
M.M.	Myomere, direct nerve supply to muscle
M.T.P.	Muscle Testing position
Post	Posterior
PSIS	Posterior superior iliac spine of ilium
Sup	Superior
R	Right
SCM	Sternocleidomastoideous muscle
V.L.	Vertebral Level, A level of the spinal column where the somato-visceral relationships are expressed
VOR	Visceral Organ Reflexes

MERIDIANS

B	Bladder
Cv	Conception Vessel
Cx	Circulation / Sex
G	Gallbladder
H	Heart
K	Kidney
Li	Large Intestine
Lu	Lung
Lv	Liver
P	Pericardium (same as Circulation Meridian)
Si	Small Intestine
Sp	Spleen
St	Stomach
Tw	Triple Warmer
X	Extra (outside of normal Meridians)
Gv	Governing Vessel

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